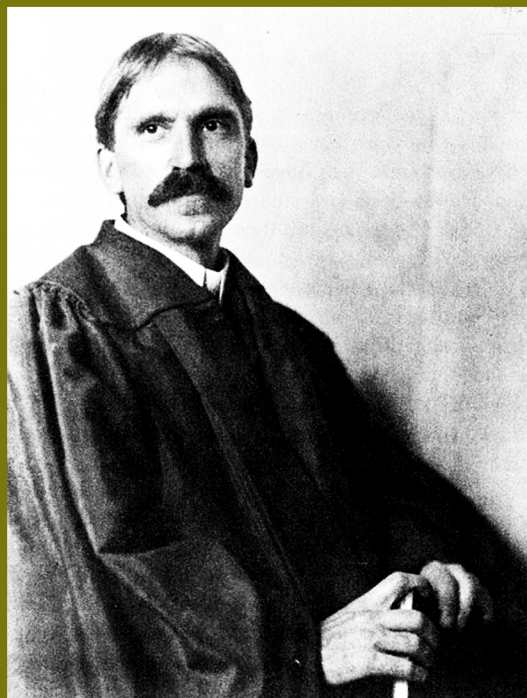




The International Journal of
INDIAN PSYCHOLOGY

Person of the Issue



John Dewey (1859-1952)

Editor in Chief:
Dr. Suresh M. Makvana
Co-Editor:
Mr. Ankit P. Patel





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INDIAN PSYCHOLOGY

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October to December 2014

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Dr. Suresh M. Makvana

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Message from Editorial Board

First and foremost, the IJIP team wishes all the writers and readers a very happy and prosperous Diwali and New Year.

The journey from October 2013 to October 2014 has been really amazing. Our experience so far has been extremely rewarding and we got to know many new writers, researchers and their creations. We received a lot of love from readers and writers for our Volume 1 of the journal. Due to your overwhelming response the International Journal of Indian Psychology was chosen in a survey by the Directory of Science to be ranked among many other such academic journals and we received a score of 19.67; claiming the first position of all the other journals throughout the world. For this, the IJIP team cannot thank you enough.

Now IJIP has entered its second phase. This includes the beginning of the Volume 2. With the change in Volume, some of the policies of our journal and its format have also changed a bit. We hope that these changes are up to your expectations and that they will not disappoint you.

We wish to congratulate all the people who have published their literature in the Volume 1, Issue no. 1. We hope that your experience with IJIP has been fruitful and worthwhile.

Furthermore we would like to address the readers that the upcoming issues will contain a lot more literature for which you have been waiting for so long.

Thanking one and all,

Dr. Suresh Makvana,

Mr. Ankit Patel

And whole Team

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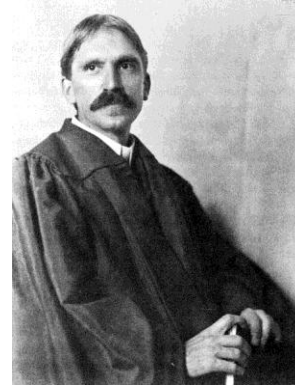


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Person of the Issue: John Dewey (1859-1952)

Ankit Patel*

Born	October 20, 1859 Burlington, Vermont, United States
Died	June 1, 1952 (aged 92) New York, United States
Alma mater	University of Vermont, Johns Hopkins University
Religion	Western Philosophy
Era	20th-century philosophy
School	Pragmatism
Main interests	Philosophy of education, Epistemology, Journalism, Ethics



John Dewey (October 20, 1859 – June 1, 1952) was an American philosopher, psychologist, and educational reformer whose ideas have been influential in education and social reform. Dewey is one of the primary figures associated with philosophy of pragmatism and is considered one of the founders of functional psychology. A well-known public intellectual, he was also a major voice of progressive education and liberalism. Although Dewey is known best for his publications about education, he also wrote about many other topics, including epistemology, metaphysics, aesthetics, art, logic, social theory, and ethics.

John Dewey graduated from the University of Vermont and spent three years as a high school teacher in Oil City, Pennsylvania. He then spent a year studying under the guidance of G. Stanley Hall at John Hopkins University in America's first psychology lab. After earning his Ph.D. from John Hopkins, Dewey went on to teach at the University of Michigan for nearly a decade.

In 1894, Dewey accepted a position as the chairman of the department of philosophy, psychology and pedagogy at the University of Chicago. It was at the University of Chicago that Dewey began to formalize his views that would contribute so heavily to the school of thought known as pragmatism. The central tenant of pragmatism is that the value, truth or meaning of an idea lies in its practical consequences. Dewey also helped establish the University of Chicago Laboratory Schools, where he was able to directly his apply his pedagogical theories.

Dewey eventually left the University of Chicago and became a professor of philosophy at Columbia University from 1904 until his retirement in 1930. In 1905, he became President of the American Psychological Association.

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Person of the Issue John Dewey (1859-1952)

Dewey's work had a vital influence on psychology, education and philosophy and he is often considered one of the greatest thinkers of the 20th-century. His emphasis on progressive education has contributed greatly to the use of experimentation rather than an authoritarian approach to knowledge. Dewey was also a prolific writer, publishing numerous books and articles on a wide range of subjects including education, art, nature, philosophy, ethics and democracy over his 65-year writing career.

TIME LINE

1. October 20, 1859 - John Dewey born at 186 South Willard Street, Burlington, Vt. His father, Archibald Sprague, was thriving in the grocer business and his mother Lucina Artemisia Rich was a devote Christian.
2. November 24, 1859 - Charles Darwin publishes *On the Origin of the Species*. In 1910 Dewey would publish the influential text, *Influence of Darwin on Philosophy and Other Essays*. New York: Henry Holt and Company (1910).
3. 1865 - Lee surrenders to Grant at Appomattox Court House on April 9, 1865, ending the Civil War. The 13th Amendment ends slavery.
4. 1879 - After studying with H.A.P. Torrey, who mentored Dewey in moral philosophy, Dewey graduates from the University of Vermont, Phi Beta Kappa.
5. 1882 - Journal of Speculative Philosophy published Dewey's first articles; "The Metaphysical Assumptions of Materialism" and "The Pantheism of Spinoza." Dewey decides to make philosophy his life pursuit.
6. 1884 - Dewey graduates with a doctoral degree from John Hopkins University after studying with Charles S. Pierce and George Sylvester Morris.
7. 1884 - Dewey hired as Associate Professor at University of Michigan and works with George Morris on Hegelianism.
8. 1886 - Dewey marries Alice Chipman. Dewey takes the position of the Head of the Philosophy Department at the University of Chicago which included the disciplines of psychology and pedagogy.
9. 1894 - Dewey's two and a half year old son Morris dies of diphtheria in Italy.
10. 1897 - Guglielmo Marconi takes the radio, his invention, to the Wireless Telegraph and Signal Company Ltd. in London.
11. 1899 - Dewey elected President of the American Psychological Association and The School and Society, which had been a series of lectures, was published.
12. 1902 - Dewey founds the school of education at the University of Chicago. The University elementary and high schools became known as the Laboratory Schools.
13. 1904 - Dewey leaves Chicago and takes the position of Professor of Philosophy and Lectureship in Psychology at Columbia University.
14. 1910 - William James, one of the great American philosophers of pragmatism, dies.
15. 1904 - Dewey's son Gordon dies at the age of eight of typhoid fever in Ireland.
16. 1912 - Dewey argues that women's suffrage is necessary to complete the democratic movement. Dewey addresses the summer students at Columbia on women's suffrage.
17. 1912 - Emperor P'u Yi steps down from the Dragon Throne of the Manchu's. Doctor Sun Yatsen helps lead the revolution which had begun the year before in Sichuan province.
18. 1914 - Archduke Franz Ferdinand assassinated leading to World War I.

Person of the Issue John Dewey (1859-1952)

19. 1915 - Dewey presents a series of lectures for the John Calvin McNair Foundation at the University of North Carolina in February under the title "German Philosophy and Politics."
20. 1918-1919 - Dewey takes a leave from Columbia University and spends the first half of the winter lecturing at the University of California. Dewey then travels with Alice to China and Japan.
21. 1918 - President Wilson announces his famous Fourteen Points to a joint session of Congress on January 8, 1918. His speech laid the groundwork for the end of WWI.
22. 1920 - Dewey lectures at the Imperial University in Tokyo and then at National University in Peking. The Chinese lectures, published in Chinese, are now available in an English: John Dewey: Lectures in China 1919 - 1920.
23. August 18, 1920 - the Nineteenth Amendment is ratified giving women the right to vote.
24. 1924 - Dewey travels to Turkey by the invitation of the Turkish government for educational system reform.
25. 1925 - Experience and Nature published and Dewey's metaphysical philosophy attempts to dissolve past mind/body dualities.
26. 1926 - Alfred Barnes takes Dewey along with a group of students to the museums of Madrid, Paris, and Vienna.
27. July 14, 1927 - Alice Dewey dies in New York City. During her life Alice had profound influence on Dewey's philosophy of education.
28. 1930 - Dewey retires from Columbia and named Professor Emeritus.
29. 1931 - Dewey's infant granddaughter dies. Additionally, George H. Mead dies. Mead and Dewey along with colleagues James H. Tufts, James R. Angell, and Edward Scribner Ames formed the core of the Chicago School of Pragmatism.
30. 1932 - Immigrant Adolf Hitler gains German citizenship. The German physicist Albert Einstein is granted a visa to the United States.
31. 1933 - Dewey works to socialize government programs during the Depression years.
32. 1933 - Franklin D. Roosevelt inaugurated president. Advent of New Deal politics.
33. 1934 - Art as Experience is published. Dewey dedicates the book to Alfred Barnes. Dewey's thirteen year old grandson dies.
34. 1935 - The John Dewey Society is founded, dedicated to the study of school and society. Dewey publishes Liberalism and Social Action, a product of a series of lectures given at the University of Virginia.
35. 1937 - Dewey endorsed the Neutrality Act thinking that war would delay his social programs.
36. 1937 - Leon Trotsky charged with sedition against Stalin. In exile, Trotsky requested an impartial hearing and the American Committee for the defense of Leon Trotsky was formed. Dewey presided over the hearing as Honorary Chairman.
37. 1939 - Dr. Tsume-ch Yu, Chinese Consul General bestowed upon Dewey and Nicholas Murray Butler of Columbia the decoration of the Order of the Jade.
38. 1939 - Dewey changes his mind on the war and realizes that totalitarianism was a grave threat to the survival of democratic institutions in Europe. He publishes, "Higher Learning and the War" (American Association of University Professors Bulletin (Dec, 1939).
39. 1940 - Dewey, joined by Alfred North Whitehead, William P. Montague, and Curt John Ducasse, defended the scholarship of Bertrand Russell in New York City.
40. 1941 - The United States enters WWII after the Japanese attack on Pearl Harbor.

Person of the Issue John Dewey (1859-1952)

41. 1945 - 1948 - Dewey works with Arthur F. Bentley on a cooperative venture resulting in a number of articles published in the "Journal of Philosophy."
42. 1945 - On August 6th and 9th, atomic bombs are dropped on Hiroshima and Nagasaki by the United States.
43. 1949 - Dewey's 90th birthday. Press releases from Canada, England, France, Holland, Denmark, Sweden, Israel, Mexico, Turkey, Japan, and India were sent to Dewey for his ninetieth birthday. Tributes to Dewey in the United States were extensive.
44. 1949 - The Soviet Union tests its first atomic bomb. William Faulkner wins the Nobel Prize for literature.
45. 1952 - Dewey dies of pneumonia at his apartment in New York City on June 1, 1952. Dewey cremated at Fresh Pond Crematory, Middle Village, Queens, NY.
46. 1952 - Sidney Hook publishes *Some Memories of John Dewey*.
47. 1965 - Official United States Dewey Stamp released commemorating the life and works of John Dewey.w

ACADEMIC AWARDS

- 1943: Copernican Citation
- 1946: Doctor "honoris causa" – University of Oslo
- 1946: Doctor "honoris causa" – University of Pennsylvania
- 1951: Doctor "honoris causa" – Yale University
- 1951: Doctor "honoris causa" – University of Rome

REFERENCE

1. Dewey, J. (1897). My Pedagogic Creed. *School Journal*, 54, 77-80.
2. Hickman, P. (2000). John Dewey. Muskingum College, Department of Psychology. Found online at <http://www.muskingum.edu/~psych/psycweb/history/dewey.htm>
3. Martin, Jay. (2003). *The Education of John Dewey*. Columbia University Press.
4. Neill, J. (2005). John Dewey, the Modern Father of Experiential Education. Wilderdom.com
5. The Center for Dewey Studies, Southern Illinois University Carbondale, http://deweycenter.siu.edu/about_bio.html

Effect of Personal Variables of Youths of Rajkot District on Their Health Care Awareness

Mohit M. Pandya* & Dr. D. J. Bhatt**

ABSTRACT

The study was designed to investigate the impact of certain socio personal variables on Health Care Awareness of youths' of Rajkot district. The sample consisted of 240 youths' (120 Male/120 Female) selected randomly from Rajkot district. Health Care Awareness scale of Dr. D. J. Bhatt and K.N. jhalodiya was used. Data were analysis by 'F' test and 't' test. Results revealed that there exists a No significant difference between the youths' socio personal variables ed. Gender, Education, Area, Age, Type of family, Family members, Education faculty and their Health Care awareness.

Keywords: *Health Care Awareness and youths'*

INTRODUCTION

Health care for the youth happiness, health, satisfaction, enjoy peace of mind, physical exercise, regular eating, adequate sleep, etc. should adopt identical. As defined by World Health Organization (WHO 1946), it is a "State of complete physical, mental, and social well being and not merely the absence of disease or infirmity". Youths' meaning 18 to 25 age people. The poor general state of health of Indian youths will have dramatic effects on our health care system in the future. Young people's health is often complex and requires a comprehensive, biopsychosocial approach (NSW Dept of Health, 2010). Some young people engage in risky behaviors that affect their health and therefore the majority of health problems are psychosocial. Many young people experience multiple problems. These behaviors are established as a young person and go on to become the lifestyles of adults leading to chronic health problems. Social, cultural and environmental factors are all important (Chown et al. 2004).

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This will be mainly due to smoking, alcohol, obesity, lack of physical activity and insufficient consumption of fruit, leading to common diseases such as diabetes, hypertension, myocardial infarction, stroke, renal insufficiency, osteoporosis and chronic back. “Today’s unhealthily living youths will be tomorrow’s chronically ill”, as Dr. Walter Dörner, president of the Austrian Medical Association pointed out. This trend will not only lead to increased costs in health care, but it will also result in a lack of available manpower in the job market. As suggested by Chini, these costs should better be reallocated to preventive costs. Through successful prevention, health care costs arising from people older than 65 can be reduced significantly.

A preventive measure against such a development can be by enforcing a permanent change in the lifestyle and health-awareness of adolescents by the use of wellness management and self-observation. Such measures fit well into the description of the health continuum by Saranummi. Who emphasizes the advantage of proactive management of health and illness compared to reactive action? Saranummi also states that the provision of knowledge and tools for self-management is another important part of the health continuum. This can be achieved through the use of wellness applications that offer their end users assistance in performing self-observation and motivate them to improve their lifestyle over a long-term period.

Young people have specific health problems and developmental needs that differ from those of children or adults: The causes of ill-health in adolescents are mostly psychosocial rather biological. Young people often engage in health risk behaviors that reflect the processes of adolescent development: experimentation and exploration, including using drugs and alcohol, sexual behavior, and other risk taking that affect their physical and mental health. The leading health related problems in the age group 12 – 24 years are (AIHW, 2007).

Intensive care units (ICU’s) contain complex health care situation and area challenging area for such systems. A number of researchers have underlined this context of work as particularly relevant to the evaluation of complex tools assisting the cooperation between workers. The medium term perspective of our research is the definition of a set of requirements for the use of context-awareness tools in the ICU.

METHOD

Objective

The main aim of this study was to investigate the impact of the personal variables of Rajkot district youths' on their Health Care Awareness.

Hypotheses

1. There is no significant difference between Health care awareness of male and female Rajkot district youths'.
2. There is no significant difference between Health care awareness and education of Rajkot district youths'.
3. There is no significant difference between Health care awareness and area of Rajkot district youths'.
4. There is no significant difference between Health care awareness and age of Rajkot district youths'.
5. There is no significant difference between Health care awareness and types of family of Rajkot district youths'.
6. There is no significant difference between Health care awareness and family members of Rajkot district youths'.
7. There is no significant difference between Health care awareness and Educational Faculty of Rajkot district youths'.

Samples

The sample size was 240 youths', comprising of 120 Male and 120 Female youths' from Rajkot district. All were aged between 18 to 25 years. The collected information can be managed carefully and more accurately.

Tools

Health care awareness Questionnaire: it was developed by Dr. D. J. Bhatt and K.N. Jhalodiya (2009), was used to measure Health Care Awareness. The questionnaire contains 40 items with True, Neutral and False response alternative. The maximum possible score is one 120 and

minimum is 40. High score indicates high level of Health Care Awareness. The test – retest reliability coefficient is 0.89 and validity is 0.84.

RESULT AND DISCUSSION

Table: 1 Analysis of variance based on health care awareness of youths' of Rajkot district with respect to gender, Education and Area

Source of Variation	Sum of Square	df	Mean Sum of Square	F
A (Gender)	84.01	1	84.01	0.94NS
B (Education)	322.01	1	322.01	3.61NS
C (Area)	132.01	1	132.01	1.48NS
A x B	940.04	1	940.04	10.56*
A x C	238.82	1	238.82	2.68NS
B x C	454.03	1	454.03	5.10**
A x B x C	1108.90	1	1108.90	12.46*
Between	3279.84			
Within error		232		
Total		239		

NS = Not Significant, * $P < 0.01$ ** $P < 0.05$

According to table No. 1 it is observed that 'F' value of Health Care Awareness of male and female Rajkot district youths' is 0.94 which exhibit No significant difference. From these results it can be concluded that male and female Rajkot district youths' differ as far as their Health Care Awareness is not concerned. It is observed from table No.1 that 'F' value of Health Care Awareness amongst level of education of youths' is 3.61 which do not exhibit significant

difference even at a level of 0.05. 'F' value of Health Care Awareness amongst level of area of youths' is 1.48 which do not exhibit significant difference even at a level of 0.05. Therefore, hypothesis three is accepted.

Table: 2 t-test comparison based on Health Care Awareness of Rajkot district youths' with respect to age, types of family, Family members and education faculty

Variable	N	SD	Mean	SED	t
<i>Age</i>					
18 to 21	105	9.98	31.17		
22 to 25	135	9.97	29.97	1.28	0.63NS
<i>Types of family</i>					
Joint Family	165 ¹	10.29	99.48		
Nuclear Family	75	9.26	100.36	1.32	0.66NS
<i>Family members</i>					
5 to below	126	10.01	100.41		
5 to above	114	9.83	98.56	1.27	1.45NS
<i>Education faculty</i>					
Arts/Commerce	156	10.10	99.93		
Science/All	84	9.75	99.42	1.32	0.38NS

NS = Not Significant

In order to know the difference between groups 't' is calculated after ANOVA in present study, 't' values on shown in table No. 2. From these findings it can be said that 't' value of means obtained for the Health Care Awareness of 18 to 21 age and 22 to 25 age youths' is 1.28 which is not show significant. The 't' value of scores of Health Care Awareness of joint and nuclear

family youths' is 1.32 which is also showing not significant. The 't' value of scores of Health Care Awareness of 5 to below and 5 to above family members youths' is 1.27 which does not show significant. The 't' value of scores of Health Care Awareness of arts/commerce and science/all faculty youths' is 1.32. This value is not significant. Following finding support this result no statistically significant differences in relation to Health Care Awareness between Rajkot district youths'.

CONCLUSION

There is no significant found between the Health Care Awareness and personal variable gender, education and area Rajkot district youths'.

There is no significant found between the Health Care Awareness and age, types of family, family members, education faculty Rajkot district youths'.

REFERENCE

1. Andreas Holzinger, Stefan Dorner, Manuela Fodinger (2010). Chances of Increasing Youth Health Awareness through Mobile Wellness Applications. Health San Francisco Volume. 6389, Springer, P. 71-81.
2. Antonovsky, A. (1979), Health, stress and coping: New perspectives on mental and physical well-being, San Francisco.
3. Blear, C. D. (1997). Clinical health psychology: A specialty for the 21st century. Health Psychology, 16, 411-416.
4. Donga Nanubhai (2007) "Educational Psychology" (First Edition), Saurashtra University, Rajkot.
5. Dr. Arvind shah and Dr. G. R. Joshi (2007). Health Psychology, divine publication, 1-6
6. Healy, B. (2012) Health and Human Rights, International Journal, Vol. 14, 36-38.
7. Marks, D. F. Murray, M. Evans, B. Willing, (2001) Health psychology: Theory, Research and practice, New Delhi: Sage Publications.
8. Nathalie Bricon-Souf, Conrad R. Newman (2007). Context awareness in health care: A review, international journal of medical informatics 76 (2007) 2-12
9. Sarafino, E. P. (2002). Health Psychology: Bio Psycho Social interactions, 4 Eds., New York: John Wiley and Sons.
10. Taylor, S.E. (1990). Health psychology, American Psychologist, 45(1), 40-50.
11. World Health Organization. Partners in Life Skills Education. Conclusions from a United Nations Interagency Meeting. Geneva: World Health Organization; 2001.

Emotional Maturity of Working and Non-Working Women

Kiranben Vaghela*

ABSTRACT

Present research has done to know the effect of Working and Non Working Women on Emotional Maturity. For this Total number of sample was 60 in which 30 working women from the age group of 20 to 40 years. And 30 non working women were taken the same age group. For the data collection Emotional maturity scale developed by Roma Pal (1988) was used for data analysis and concluded result 't' test was used. For this dimension implies that in positive sense there was significant difference between working and non working women. The result indicate the working women significantly differ on Emotional maturity score as compared to non working women ,working women have shown better Emotional Maturity compared to non working women .

Keywords: *Emotional Maturity*

INTRODUCTION

Emotion is the complex psycho physiological experience of an individual's state of mind as interaction with biochemical (internal) and environmental (external) influences. In humans, emotion fundamentally involves "physiological arousal, expressive behaviours and conscious experience." Emotion is associated with mood, temperament, personality, disposition, and motivation. Motivations direct and energize behaviour, while emotions provide the affective component to motivation, positive or negative. A related distinction is between the emotion and the results of the emotion, principally behaviours and emotional expressions. People often behave in certain ways as a direct result of their emotional state, such as crying, fighting or fleeing. If one can have the emotion without a corresponding behaviour, then we may consider the behaviour not to be essential to the emotion.

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Emotional Maturity of Working and Non-Working Women

The emotional aspect of maturity is the most important factor in the development of the comprehensive mature personality, especially for the gifted. This is the global factor of emotional maturity which is the strength to actualize individual abilities within the frame of social demands.

According to **Goleman (1995)**, we have two minds, one that thinks and one that feels, these two fundamentally different ways of knowing, interact to construct our mental life. The rational mind is the mode of comprehension we are typically conscious of more prominent in awareness, thoughtful, able to ponder and reflect. The emotional mind is impulsive and powerful and sometimes illogical. These two minds operate in harmony with each other, most of times feelings are essential to thought, and most of the times thoughts to feeling. But when passions surge the balance tips: it is not just I.Q., but emotional intelligence that matters. Goleman rightly points out that, "It is not that we want to do away with emotions and put reason in its place, but instead find an intelligent balance of two".

According to Walter D. Smitson (1974) emotional maturity is a process in which the personality is continuously striving for greater sense of emotional health, both intra physically and intra-personally.

Kaplan and Baron elaborate the characteristics of an emotionally mature person, say that he has the capacity to withstand delay in satisfaction of needs. He has the ability to tolerate a reasonable amount of frustration. He has belief in long-term planning and is capable of delaying or revising his expectations in terms of demands of situations. An emotionally mature child has the capacity to make effective adjustment with himself, members of his family and his peers in the school, society and culture. But maturity means not merely the capacity for such attitude and functioning but also the ability to enjoy them fully.

There are many various factors are put its effect on Emotional Maturity one of them is women. Present research is done to know that effect of working and non working women on Emotional Maturity.

PROBLEM OF STUDY

The problem of the present study is as under:

“A Comparative study of Emotional Maturity among working and non working women”

OBJECTIVES OF THE STUDY

The main objectives of present study are as under:

1. .To study of the Emotional Maturity among working and non working women.
2. To study and compare the various dimension of Emotional Maturity of working and non working women.

HYPOTHESIS

The main hypotheses of present study are as under:

1. There is no significant difference between working and non working women in various dimension of Emotional Maturity.
2. There is no significant difference between working and non working women in Emotional Stability.

Emotional Maturity of Working and Non-Working Women

3. There is no significant difference between working and non working women in Emotional Regression.
4. There is no significant difference between working and non working women in Faulty Social adjustment.
5. There is no significant difference between working and non working women in Lack of Independency.
6. There is no significant difference between working and non working women in Flexibility.

VARIABLES

The variables of present study are having given in following.

***In dependent variable:**

Working and non working women.

****Dependent variable :**

Various dimension of Emotional Maturity are measured by Roma Pal (1988)

SAMPLE:

The main aim of the present research is “A comparative study of Emotional Maturity of working and non working women”. For this total no of sample were 60 in which 30 working women from the age group of 20 to 40 years. And 30 non working women were taken from the same age group.

TOOL:

Emotional maturity scale developed by Roma Pal (1988) was used to measure emotional maturity the scale contains 40 items with totally agree, neutral, generally, disagree and totally disagree. Response alternative the responses were marked 5,4,3,2 and 1 respectively and from the responses we had to select only one response in every sentence. 5 for tick mark totally agree, 4 for tick mark agree, 3 for tick mark neutral, 2 for tick mark disagree and 1 for tick mark totally disagree. The maximum possible score is 200 and minimum is 40. Scoring pattern shows that more score indicates less emotional maturity. The less score in the scale indicates good (more) emotional maturity.

The reliability score of emotional maturity scale comes to 0.84, derived by the split half method, obtained from the sample of 200 students. The researcher of the present research has found out the reliability score as 0.81, by using split-half technique on the sample of 50 students.

PROCEDURE

After establishing report Emotional Maturity inventory were administered individuals to every subject. All the instruction were strictly following which are been given the manual of inventory. The responses of inventory have scored as per scoring keys. This has given in the manual of inventory. The data was categories and arranged in respective table according to the stoical technique appraised.

Emotional Maturity of Working and Non-Working Women

STATICALLY ANALYSIS

The main aim of the present research is to study and compare to Emotional maturity between working and non working women. Scoring was done as per scoring key of the inventory to examine significantly difference between working and non working women. For data analysis 't' test was used.

RESULTS

Table: 1 N=60 Show in Mean, SD, and 't' ratio of various group of age on score of various dimensions of mental health

Dimension of Emotional Maturity	Group	N	Mean	SD	't'	Significant level
Emotional instability	Working women	30	33.87	3.3	3.87	0.01
	Non working women	30	30.23	3.96		
Emotional Regression	Working women	30	28.1	3.65	1.46	NS
	Non working women	30	26.67	4		
Faulty social adjustment	Working women	30	37.57	4.89	2.4	0.05
	Non working women	30	34.23	5.88		
Lack of Independency	Working women	30	19.1	2.69	3.01	0.01
	Non working women	30	16.69	3.45		
Flexibility	Working women	30	28.1	3.12	3.64	0.01
	Non working women	30	25.33	2.79		
Overall emotional maturity	Working women	30	18.7	12.2	2.29	0.05
	Non working women	30	17.29	10.1		

DISCUSSION

In result table an attempt is to find out the different between working and non working women in various dimension of Emotional Maturity score with 't' test.

't' value of working and non working women of Emotional instability score is 3.87, which is significant at 0.01 level. It means working women are significant differ on Emotional instability Positive score as compare to non working women. Working women have shown better Emotional instability by getting high mean score $M = 33.87$ then non working women mean $M = 30.23$.

't' value of working and non working women of Emotional regression is 1.46 which is not significant. Working women have shown better Emotional regression by getting high mean score $M = 28.10$ then non working women $M = 26.67$

't' value of working and non working women of Faulty social adjustment is 2.40 which is significant at 0.05 level. It means working women are significant differ on Faulty social adjustment score as compare to non working women. Working women have shown better Faulty social adjustment by getting high mean score $M = 37.57$ then non working women $M = 34.23$

't' value of working and non working women of Lack of Independency is 3.01 which is significant at 0.01 level. It means working women are significant differ on Lack of Independency score as compare to non working women. Working women have shown better Lack of Independency by getting high mean score $M = 19.10$ then non working women $M = 16.69$

't' value of working and non working women of Flexibility is 3.64 which is significant at 0.01 level. It means working women are significantly differ on Flexibility score as compare to non working women have shown better Flexibility score as compare to non working women. Working women have shown better Flexibility by getting high mean score $M = 3.12$ then non working women $M = 2.79$.

't' value of working and non working women of overall Emotional maturity is 2.29 which is significant at 0.05 level. It means working women are significant differ on overall Emotional maturity score as compare to non working women. Working women have shown better overall Emotional maturity by getting high mean score $M = 18.70$ then non working women $M = 17.29$.

REFERENCES

1. Arun joseph(2010). Meaning and definition of emotional maturity. Data retrieved on 11 aug 2011 from <http://arunarun.joseph.blogspot.com/2010/03/study-of-emotional-maturity-and-html>.
2. Arya, A. (1997). Emotional Maturity and values of superior children in family. Fourth survey of research in Education Vol.11, New Delhi: NCERT.
3. Coleman,(1994).Definition of emotional maturity. data retrieved on 12 oct 2009,from ssmrae.com/admin/.../37802308c3531dffb3bddd71e963e04.pdf

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4. Landau, E. (1998). The Self- The Global factor of Emotional Maturity. Journal Article, Roeper Review, Vol.20. 1998.
5. Singh, Y and Bhargava, M, Manual for Emotional Maturity Scale (Ems), National Psychological Corporation, Agra, 1990.
6. Walter,D. and simston W.S (1974).Definition of emotional maturity.MH.winter.58:9-11.

Need For Life Skills Education among Tribal and Non Tribal Students

Ankit Patel*

ABSTRACT

The academic achievement is correlates of Psychological variables. This research work was conducted on a sample of 350 tribal and 350 non-tribal students studying in secondary schools in PANCHMAHALS district with a view to finding out the effect of the intelligence and academic motivation on their academic achievement of the pupils in tribal secondary schools in Gujarat, India. The sample was collected from the students of non-government high schools of tribal area district who significantly differ in their intelligence and academic motivation. Desai's verbal-non verbal group test of intelligence was administrated to the students. Academic motivation test was developed by researcher and administrated to the students. The students' academic achievement tool is last preliminary examination score in March, 2011. The mean value analysis of significance of the mean difference and the values were calculated, other calculated is mean value analysis of variable and F-test. The findings show that there is no significant difference in the IQ and academic motivation of standard: X students in the secondary schools of tribal area of the PANCHMAHALS district, Gujarat-India.

Keywords: *Life Skill Education, Tribal and Non Tribal Students*

REVIEW OF LITERATURE:

The marginalized, by definition and logic and irrespective of faith, form or culture are smaller in number than the dominant (or mainstream) social groups. Indian society is marked by age-old tensions between marginalized groups, castes, tribes, and multiple social layers stemming from a spaghetti bowl of linguistic, racial and religious groups. People displaced by factors such as natural disasters, man-made political events (e.g. wars), economic changes, inconsistency in patterns of livelihood support, have continuously added to swelling numbers of these marginalized communities.

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The tribal population in India, an estimated 87 million, is marked by intense diversity

Traditionally referred to as *advises*, tribes, or tribal, scheduled tribes (STs) constitute about 9% of India's population. Despite diversity in their community history, languages, production practices, and relationships with the non-tribal world, approximately 87 million Indians fall under the *advice* population, of which nomadic and denitrified communities¹ (DNTs), are at a projected 60 million. Nine States – Andhra Pradesh, Chhattisgarh, Gujarat, Jharkhand, Madhya Pradesh, Maharashtra, Orissa, Rajasthan, and West Bengal – together account for more than four-fifths of the total tribal population in India.

Each of the 573 scheduled tribes has their own language, and differs from the one mostly spoken in the State where they reside (Govinda, 2002). Tribal are not a homogenous group. Different tribes, even if living in the same village, maintain exclusive identities. Socialization is generally endogamous and they identify more with people belonging to their tribe rather than to those living in the same village or area.

The current perception of tribal, and their resulting exclusion from mainstream society, can be traced to the pre-Independence period:

In pre-colonial times, nomadic communities sustained themselves through livelihood options such as cattle rearing, trade, crafts, carrying items for barter etc. The *advisees* of India repeatedly rebelled against the British in the Northeast, Bengal, Bihar, Madhya Pradesh, Maharashtra, Gujarat and Andhra Pradesh. *Advice* rebellion in hills and forest was concurrent with education of the rest of India (Devy, 2008). Branded as “criminals” during the long period of British rule, the land possessed by the “criminal tribes” was alienated. At the time of independence, India started to view the *advisees* as primitive, and thus out of step with history (Devy, 2008).

Each of the 573 scheduled tribes has their own language, and differs from the one mostly spoken in the State where they reside (Govinda, 2002). Tribal are not a homogenous group. Different tribes, even if living in the same village, maintain exclusive identities. Socialization is generally endogamous and they identify more with people belonging to their tribe rather than to those living in the same village or area.

1 This is a government assigned category for nomadic communities. Some of these communities are also classified as scheduled castes (SC), scheduled tribes (ST) and other backward classes (OBC), while others are left out entirely.

“The history of tribal during the last 60 years is filled with stories of forced displacement, land alienation and increasing marginalization, eruption of violence and the counter-violence by the State. Going by any parameters of development, the tribal always figure at the tail end. The situation of the communities that have been pastoral or nomadic has been even worse.”

Ganesh Devy, Founder, Bhasha

As a result, tribal communities continue to face economic deprivation and lack of access to basic services:

As a basic component of human development, the 83rd Amendment to the constitution has made free elementary education a fundamental right of all the citizens of India. Successive governments have attempted to balance the inequity in the education system, particularly for the

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marginalized groups. Acknowledging that tribal comprise the most deprived and marginalized groups with respect to education, a host of programs and measures have been initiated since India's Independence. With education viewed as a crucial input for total development of tribal communities, elementary education has been made a priority area in the tribal sub-plans since the 5th Five Year Plan

(1974-79). As of March 2001, there were 16 million ST children out of a total child population of about 193 million in the age group of 6-14 years in the country.

"In the 1980s, with literacy levels in the tribal areas 20% lower than the national average, an ideological shift in government thinking occurred. The realization of the need to mainstream tribal areas was based on the link between lack of education and under-development of tribal areas."

A. M. Tiwari, Secretary, Tribal Development Affairs, Gujarat

There have been marked improvements in access, and to some extent in quality of primary education in tribal areas:

Education has recently witnessed a rapid transformation, particularly in the areas of access, pedagogic reform and community participation in tribal areas. Emphasis has been on improving access to primary education through schemes of non-formal education (NFE), and attempts to improve quality via training, using local teachers, adapting curriculum and providing locally relevant teaching-learning materials to tribal students.

"Fundamental changes in how society thinks are essential to enable the marginalized to engage with the mainstream, and thereby improve their survival (and revival) chances after a disaster. In societies where prejudice and bias run deep and there is little public debate on key issues, the need for a profound shift in attitude is critical."

Suchitra Sheth, Founder of Tribal Education Community, Setu

Low literacy rates continue to indicate a need for more holistic support, from health to non-tribal attitudes, thus allowing for delivery of high-quality education:

Despite the education initiatives, there is disparity among the states in terms of tribal literacy rates ranging from 82% in Mizoram to 17% in Andhra Pradesh. The ST literacy rate continues to be below the national average of 29.6% (Govinda, 2002), with literacy rates among tribal communities (in particular women) tending to be the lowest². There exist areas in the tribal-dominated districts across India that remains largely unnerved by primary education facilities. Tribal children tend to inhabit forests and hard-to-reach areas where dwellings are spread and access to good quality education is more limited. Low enrolment coupled with soaring drop-out rates in primary schools exacerbates the problem, which has its origin in a gamut of inter-related cultural and socio-economic variables. *Advises* are associated with a certain stigma and behavior, which can be partially tackled through a change in mindset among non-tribal.

The under-development of the tribal areas further exacerbates issues in delivering quality education:

1. Good teachers prefer to live in urban/semi urban centers and therefore, need to commute for 4-5 hours per day to reach tribal area schools

Need For Life Skills Education among Tribal and Non Tribal Students

2. Lack of electricity and water results in poor school infrastructure causing dismal sanitary conditions and low ventilation
3. Long lead times for delivery of teaching materials imply that textbooks and training materials arrive at the schools after the training program, or not at all

PIECES OF THE PUZZLE:

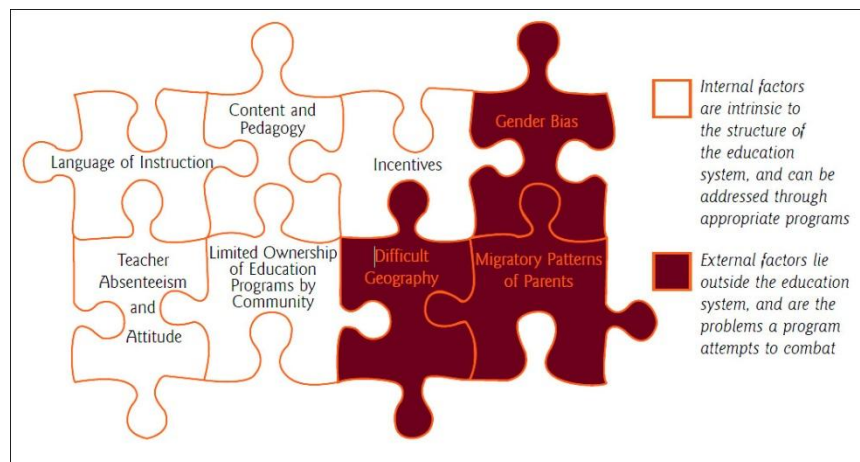
Reasons for Out-of-School Tribal Children

High numbers for tribal out-of-school children (those never enrolled in school or drop-outs) stems from a range of factors:

Empirical evidence suggests that tribal children possess the basic cognitive abilities and psychological dispositions for successful participation in schools, and their low achievement levels are attributed to school-related variables as would apply to non-tribal students (Gautam, 2003). Poor performance of tribal students and the below average situation of primary education in tribal areas is driven by inter-related factors. Most children tend to be first generation learners whose education is not reinforced or supported in their home environments. Some of these issues can be addressed through appropriate program design and strategy.

“The situation of tribal education is related to the quality of education in general, and not solely to being tribal. Of course being a tribal also means that most of the time they are also poor, they live in areas where the provision of education is very weak, so the situation is not only because they are tribal but because of all these inter-related issues. It is important therefore to view the problem in all its complexity.”

Priyanka Singh, Incharge,
Education and Health Programs, Seva Mandir

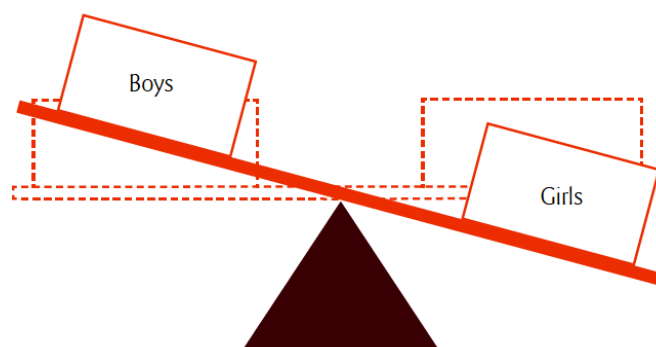


EXTERNAL FACTORS:

Gender Bias

Although external to the education system, gender disparity is an important issue that needs to be tackled via appropriate programs. Tribal girls have a higher tendency to drop-out and a lower tendency to enroll in school.

The Inexcusable Absence of Girls: Gender Disparity in Education:



Gender imbalance is entrenched at all levels of education, placing tribal girls at a disadvantage in terms of their overall advancement

Among the tribal community, tribal girls form the most neglected group, and are least likely to be educated. An estimated 37% of girls aged 7–14 belonging to the lowest castes or tribes do not attend school, compared with 26% of majority girls of the same age (Lewis and Lockheed, 2007). Tribal girls account for only 18% of the total girls enrolled at school, and their dropout rate is 67%. Additionally, school attendance for tribal girls is 9 percentage points below that of tribal boys.

Tribal communities are more likely to educate boys than girls due to social and economic factors – exacerbating this inequity

In many tribal communities, parents give minimal importance to girls' education due to economic and social limitations, send them to school only intermittently, or keep the girls sheltered from the outside world. Most frequently, girls, apart from taking part in agricultural activities and collection of forest products are engaged in sibling care. They are often forcibly pulled out from schools, and become child laborers, never to return to education. For example, tribal girls constitute majority of the migrant child labor (primarily tribal girls) working in cotton fields (Rajasekaran, 2008).

INTRODUCTION:

Many researchers have found that intelligence and academic motivation is one of the factors contributing to the academic achievement of students as such the present study tries to ascertain whether there is any significant difference in the academic achievement of the pupils' studying in secondary schools. Academic motivation means the ways of studying whether systematically or

Need For Life Skills Education among Tribal and Non Tribal Students

unsystematically efficiently or otherwise study can be interpreted as a planned program of subject mastery.

Intelligence cover all related aspects of variable I. Q. and non variable I. Q. other way components of intelligence is understanding, classification, words of opposite, reasoning ability, same relation, number ability, arrangement sentence etc.

Academic motivation cover all related main aspect of attitudes towards school, aspiration of academic and present studying students of study habits. Many researchers say academic motivation and academic achievement is related variables.

We find in intelligence was related to n-ach, socio cultural status, academic achievement (Singh R, 1986, Prakash J, 1986) and self identify (Sahai S. K, 1985) the period under review is not strikingly different from the earlier one (Sinha S. K 1977) reported negative attitude towards the present examination system using a Liker-type questionnaires among university students, teachers and guardians. Kumari Sudha (1982) study was significant difference among the four socio metric groups in case of intelligence and achievement. Mr. Dixit and Mithilesh Kumari (1985) study at all the other intellectuals' levels the academic achievement of the girls was superior to that of the boys. In case of boys there was very high correlation between intelligence test scores and academic achievement.

OBJECTIVES:

The objectives of the present study are as such...

O.1: To study the academic achievement of tribal and non-tribal students.

O.2: To study the effects of intelligence and academic motivation on the levels of academic achievement.

O.3: To study the interactional effects of intelligence and academic motivation on academic achievement of tribal and non-tribal students.

HYPOTHESES:

The following null hypothesis is stated for the present investigation...

HO1. There is no significant effect of intelligence on the levels of academic achievement of tribal and non-tribal students.

HO2. There is no significant effect of academic motivation on the level of academic achievement of tribal and non-tribal students.

HO3. There is no significant effect of the main difference of academic achievement of tribal and non-tribal students.

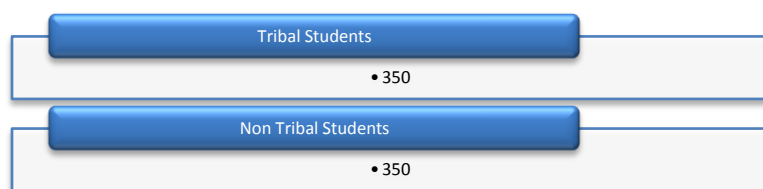
Need For Life Skills Education among Tribal and Non Tribal Students

HO4. There is no significant interactional effect of I. Q. X case on the academic achievement of tribal and non-tribal students.

HO5. There is no significant interactional effect of academic motivation X case on the academic achievement of non-tribal students.

DESIGN OF RESEARCH:

In this study 7 tribal and non tribal high secondary schools covering 50% of the total population from the total number of 12 schools located in PANCHMAHALS district (Gujarat-India) were selected on random basis all the students both tribal and non tribal studying in X standard were Desai variable -non variable group intelligence test. Researcher developed a test of academic motivation were administered this study. Thus the sample included 350 tribal and 350 non tribal students.



Total Sample for this study is 700.

TOOLS:

In the present study for finding of the affects I. Q. and academic motivation on the academic achievement the main objectives of this study. Researcher has developed Education Progress Report of research sample variable of educational achievement is tool of school preliminary examination in March 2009. Percentage score present study is for finding out the I. Q. and academic motivation of students of class X. The IQ test developed by Mr. K. G Desai has been used. The test consists of 80 items classified into eight test battery, classified into eight categories viz. understanding, classification, words of opposite, reasoning ability, same relation number ability, unarranged sentence etc. The test includes some items which discriminate students at 0.01 levels and 0.05 levels. Some items into inventory are of diagnostic nature.

The academic motivation test developed by researcher has been used the test consist of 120 items classified into three sub. Inventory of 40 items classified into three categories viz. attitudes towards schools, academic aspiration and study habits. Each item in the inventory is to be ticked by students against “agree”, “partly agree”, “disagree”. The respondent is required to tick only one choice against those three choices which we think is best applicable to his/her. In case of the sub variables depicting goods academic motivation, the students has to be given three marks if he put, a tick in the column of three, two, one marks are to be given if he puts a tick mark in the column of agree, partly agree, disagree. In the case of statements depicting bad academic

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motivation, the academic motivation test score is between 120 to 360 in positive and negative items, high scores on the inventory will indicate good academic motivation and vice versa.

DATA:

The data collected were of quantitative nature in the form of score of IQ. Academic motivation and academic achievement of the pupils of standard X.

ANALYSIS FORMULA:

The sample of this study is taken from selected 12 schools. It was observed that one school a co education school had results which were consistently superior to the results of the others 7 schools. It was named better high achieving school having 350 tribal and 350 non tribal students.

For analysis formula used is CR value, t- Test, F- Test.

RESULTS:

Table: 1, Relation Academic Achievement of tribal and non tribal students.

Group of sample	N	Mean	MD	SD	CR Value	Levels of Significance
Tribal students	350	44.00	42.3	10.15	4.97	Sign 0.01 level
Non tribal students	350	48.72	42.3	11.092		

Table: 2, The Score of IQ and Academic Achievement of the high, medium, low between tribal and non tribal students.

Variable ↓	Level of → Academic Achievement	High				Medium				Low			
		55 to 70				40 to 54				Below 39			
		N	M	6	t Value	N	M	6	t Value	N	M	6	t Value
1	2	3	4	5	6	7	8	9	10	11	12	13	14
IQ and caste	Tribal	36	120.7	14.7	10.29**	166	115.6	13.4	11.74**	48	90.5	17.5	0.57*
	Non tribal	48	125.1	16.5		170	118.5	14.7		42	92.6	15.2	
Academic motivation and Caste	Tribal	36	321.7	10.3	4.54**	166	308.1	13.4	3.14**	48	312.7	11.7	2.15**
	Non tribal	48	310.3	12.7		170	303.7	12.4		42	306.4	13.6	

* Non Significant at 0.05 levels, ** Significant at 0.05 or 0.01 levels

Need For Life Skills Education among Tribal and Non Tribal Students

Table: 3, the score of factorial design analysis of variance of the effect of caste (Tribal- Non Tribal) X I. Q.

A- Intelligence Quotient				
Caste		High A1B1	Medium A2B2	Low A3B3
Tribal Students	N	20	120	45
	Ex	1210	3544	3474
	-X	60.5	46.2	38.6
	Ex ²	462101	483118	320138
Non- Tribal Students	N	46	150	74
	Ex	2700	7514	3084
	-X	58.7	50.1	41.7
	Ex ²	420640	397120	362898

B- Academic Motivation				
Caste		High A1B1	Medium A2B2	Low A3B3
Tribal Students	N	32	146	64
	Ex	1786	6496	3244
	-X	55.8	44.5	50.7
	Ex ²	366718	427114	66994
Non- Tribal Students	N	34	124	100
	Ex	2064	3246	4380
	-X	70.7	42.3	43.8
	Ex ²	380116	336894	65552

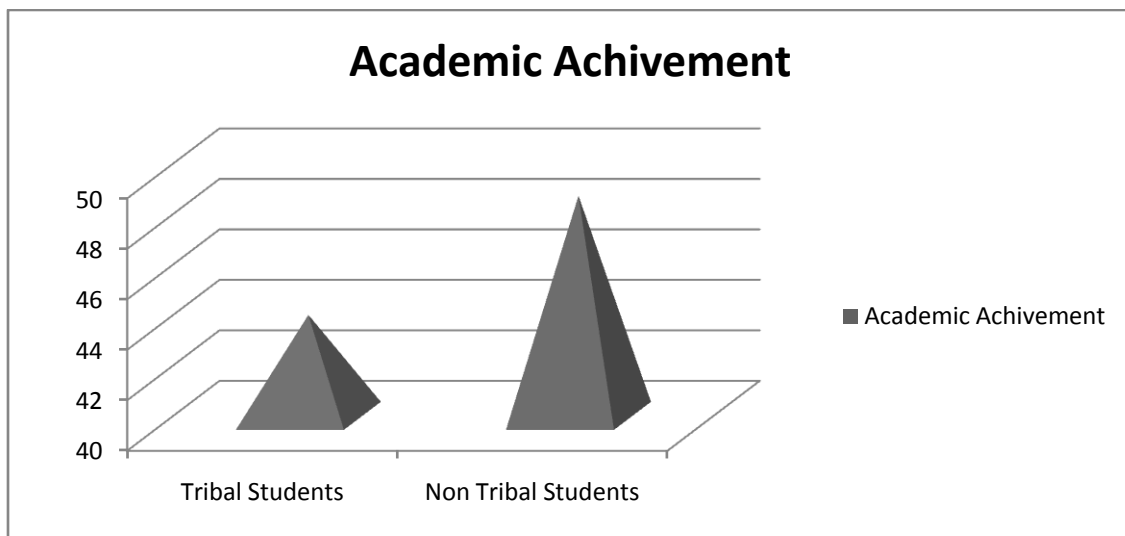
Table: 4

Significant of F value						
Interactional Variable	Origin of	DF	SS	MS	F Value	Significant of F
1	2	3	4	5	6	7
Caste X I. Q.	*Independent Variable- 1 I.Q	1	122.72	122.72	0.039	Not Significant at 0.05 levels
	*Independent Variable- 2 Caste	2	10424.23	10424.23	3.35	Significant at 0.05 levels
	*I.Q	2	260.15	130.075	0.042	Not Significant at 0.05 levels
	X Caste					
	*error	488	759567.26	3117.9		

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Caste X Academic Motivation	*Independent Variable- 1 Academic Motivation	1	86.96	86.96	0.0777	Not Significant at 0.05 levels
	*Independent Variable- 2 Caste	2	7671.4	3835.7	3.02	Significant at 0.05 levels
	*Academic Motivation	2	534.39	267.2	0.24	Not Significant at 0.05 levels
	X caste					
	*error	488	275584.5	1129.4		

CHARTS:



INTERPRETATION OF TABLES AND TESTING OF HYPOTHESIS:

The study of table- 1 show that t- value is significant at 0.01 levels constructed by research **HO3** is “There is no significant of the mean difference of Academic Achievement of tribal and non-tribal students” tested t-value is 4.97 which is significant. If we reject of there is significant of the mean difference of Academic Achievement between Tribal and non Tribal students.

HO1: “There is no significant effect of intelligence on the levels of academic achievement between tribal and non tribal students” tested-t value is 10.29, 11.74, 0.57 (I.Q. High, Medium Academic Achievement of the tribal and non tribal students) which is significant if we reject of this null hypothesis, but I.Q. of low Academic Achievement of the Tribal and non Tribal students which is not significant. So we accept of this null hypothesis.

HO4: “There is no significant interactional effect of I.Q. X caste on the Academic Achievement of tribal and non tribal student” tested F. value is 0.042 which is not significant. So, we accept of no significant interactional effects of I.Q. X caste on the Academic Achievement of tribal and non-tribal students.

HO5: “There is no significant interactional effect of Academic Motivation X caste on the Academic Achievement of tribal and non tribal students” tested F- value is 0.24 which I not significant. So, we accept of no significant interactional effects Academic Motivation X caste on the Academic Achievement of Tribal and non Tribal students.

HO2: “There is no significant effect of Academic Motivation on the levels of Academic Achievement of tribal and non tribal students” tested t-value is 4.54, 3.14, 2.15 (Academic Motivation of high, medium, low Academic Achievement of the Tribal and non Tribal students) which is significant at 0.05 or 0.01 levels. So, we reject of this null hypothesis.

FINDING:

- There is significant effect of intelligence on the level (High, Medium Academic Achievement) of the academic achievement between tribal and non tribal students.
- There is significant effect of Academic Motivation on the levels of the academic achievement between tribal and non tribal students.
- There is significant of the mean difference of academic achievement of tribal and non tribal students.
- There is no significant interactional effect of I.Q. caste on the academic achievement of tribal and non tribal students.
- There is no significant interactional effect of Academic Motivation X caste on the Academic Achievement of tribal and non tribal students.

REFERENCE:

1. Aggrawal J. C. “Educational Research” Arya Book Depot, Delhi 1975, Page. 15 to 20
2. Anastasi Anne. “Psychological Measurement Macmillan” Robants Publication, New York, 1961
3. Asthasan Bipin. “Measure & Evaluation in Psychology” Vinod Pustak Mandir, Agra, 2000, Page. 22 to 25
4. Best Jhon W. “Research in Education” Delhi Prentice Hall of India, 1977
5. Besunont, Henry. “Psychological Factor in Education” MCC Raw Hill Book, Company INC First Edition, 1949, Page. 45 and 46
6. Desai K. G. “Education of Psychology” Anada Book Publication, Ahmadabad, 1999, Page. 33 to 35
7. Garret H. E, “Statistics in psychology and Education” Vakils Feher and Simons, Bombay, 1973

Need For Life Skills Education among Tribal and Non Tribal Students

8. Gautam, V. 2003. "Education of Tribal Children in India and the Issue of Medium of Instruction: A Janshala Experience." UN/ Government Janshala Programme. New Delhi.
9. Govinda, R. 2002. India Education Report: A Profile of Basic Education. Oxford University Press.
10. Jha, J and D. Jhingran. 2002. "Review of Elementary Education for Poorest and Other Disadvantaged Groups: The Real Challenge of Universalisation." Centre for Policy Research. New Delhi.
11. Jhingran, D. 2000. "Janshala – Mainstreaming Out of School Children through Bridge Courses". Monthly Newsletter of the Joint GOI-UN System Education Program. April-June.
12. Kothai, K. 2007. "Seasonal Migration hinders Education in India". OneWorld South Asia. October.
13. Mishra, M. 2007. "Status of Elementary Education in Tribal Areas of Orissa". Department of Tribal Education, Orissa.
14. Mishra, R.C., Sinha, D and J.W. Berry. 1996. Ecology, Acculturation and Psychological Adaptation: A Study of Adivasis in Bihar. International Association for Cross-Cultural Psychology.
15. Nair, P. 2007. "Whose Public Action? Analyzing Inter-sectoral Collaboration for Service Delivery: Identification of Programmes for Study in India." International Development Department, Economic and Social Research Council. February.
16. National Tribal Commission. 2008. "Education of Tribal People in India." March.
17. Noronha, A. 2006. "Education of Tribal Children, from Social Mobilization to Poverty Alleviation." OneWorld South Asia. March.
18. Rajasekaran, G. 2008. "Tribal girls till the land in Bt cotton fields." Newindiapress.com.
19. Sarva Shiksha Abhiyan. 2002. "Education of Tribal Children in India."
20. Stephen Wisemer. "Intelligence and Ability" Pengin Book.Ltd, England, 1961
21. Sweta Bagai, Neera Nundy. "Tribal Education" DASRA, 2009
22. UNESCO. 2002. "Innovations in Non-Formal Education: A Review of Selected Initiatives from the Asia-Pacific Region." Bangkok.

Personality Traits and Academic Achievement among College Students

Dr. Shashi Kala Singh*

ABSTRACT

This study aims to determine the significant difference between high and low achievers on 16 personality traits factors. Among a sample of 200 adolescents (100 high achiever and 100 low achiever) studying in B.A part-I were selected by stratified random technique from different colleges located in Ranchi. 16 personality factor questionnaires were administered to measure the dimensions of personality traits of both the groups. Data was analyzed by using means, standard deviations and t test. Result revealed that high achievers had unique personality profile than low achievers.

Keywords: *High and Low Achievers, Personality Traits*

INTRODUCTION

Academic achievement has always been considered to be a very important factor in the educational life of an individual, because good academic record over years predicts future success of a person. Education is unique investment and academic achievement is a vital aspect of it. In this world of industrialization and globalization, education has become highly commercial and academic excellence has gained through tough competitions (Woolfolk, 2001). Academic achievement of students has been a great concern to educationist since time immemorial. Now a day, this trend has been intensively felt by the academicians, parents and students (Anzi, 2005). The educational status of an individual is highly depicted through the academic achievement. In our society academic achievement is considered as a key criterion to judge one's total potentialities and capacities. Hence academic achievement occupies a very important place in education as well as in the learning process. Academic achievement is defined by Crow and Crow (1969) as the extent to which a learner is profiting from instruction in a given area of learning i.e. achievement is reflected by the extent to which skill and knowledge has been imparted to him.

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Education plays a vital role in building a society. Modern society cannot achieve its aims of economic growth, technical development and cultural advancement without fully harnessing the talents of its citizens. The word academic here, stands for those aspects of school that involve the study of books. The achievement of students in the course syllabi, and books studied by them and expressed in the forms of grade, percentage or on any other point of scale can broadly be termed as academic achievement. The importance of prediction of academic achievement has increased during recent years because of various reasons. One of the reasons is the mushroom growth in student population which has created manifold problems. The second is that child education has not been found to be commensurable with the efforts and huge expenditure made in this field. The third is concerned with the wastage of great human potentials because it is often found that students perform much below their capacities. Academic achievement individual learns to utilize his energies with the given innate potentials and a particular pattern of socializing pressure. Considering the fact that both innate potentials and environmental factors play equally important roles in academic achievement, it is imperative to look into the interplay of both these factors. In this study, it was decided to use examination marks as criterion measure of academic achievement. Personality is the ability to get along in adult situation; it is the person's type of action, reaction, opinion and mood, a set of physical and social traits (Mullanattom, 1993). Personality plays very important role in academic achievement. Some researchers have classified the students as high-achiever and low-achiever according to their performance. In the present investigation students who have scored 65% and above marks in the academic achievement have been taken to be high achiever and students who have scored 45% and less than that have been taken to be low achiever. Investigating the relationship of academic achievement with various personality characteristics indicates that through the findings with respect to most of the personality factors are conflicting, some factors, at least, seem to be important in this connection. Several personality characteristics also have been investigated using different tests. Though the findings of the studies are not very consistent, they provide further evidence regarding the importance of personality factors in academic achievement. Students differ in their personal values; they receive and process information differently; their personality trait is different and hence, so also is their understanding. It is often argued that a blend of personality characteristics is necessary for people to be successful in their career. Educators, researchers, and psychologists have been constantly searching for parsimonious set of variables that predicts patterns of students' behaviors and their relationship to academic achievement.

REVIEW OF LITERATURE

A vast number of studies have sought to determine the predictability of academic performance by personality traits. Personality has been recognized as a determining factor on how people learn (Lawrence, 1997; Myer et al, 1998). College students tend to prefer learning environments consistent with their own personality type preference. Many scholars have accepted five-factor model of personality as a replicable and unifying taxonomy of personality (Digman, 1990; Goldberg, 1992; Witt et al, 2002) and have found personality traits to be significantly related to

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successful job and school performance, both logically and statistically (Hogan & Hogan, 1989; Day & Silverman, 1989). Traits like stinginess, curiosity, assertiveness or laziness are virtually perfect examples of personality and traits of psychological properties are sociability, loyalty, humor, musical ability and respects for his parents (Robins, & Trzesniewski, 2005). Need for achievement and manifest anxiety can also be considered as trait (Wolters, 2004). Intelligence, interest and aptitude are regarded as traits (Rindermann & Neubauer, 2001). In terms of academic success, personality would appear to play a greater role than intelligence (Cattell, 1978; Eysenck, 1992). Mouw and Khanna (1993) showed the impossibility of predicting successful performance based on personality variables. At a higher level of education, Nofle & Robins (2007) studied the relationship between personality and academic aptitude and achievement. Blechner and Carter, 1956; Osborne and Sanders, 1949; Shoemaker and Rothrer, 1948; Sopchak, 1958; Thompson, 1947, 1948a, 1948b, 1951) made an attempt to relate personality characteristics as measured by projective tests, with academic achievement. Conscientiousness and openness were the most important personality correlates of academic achievement across different informants (self, teacher, and parent) also in a study conducted by Barbaranelli, Caprara, Rabasca, and Pastorelli (2003).

HYPOTHESES

There will be significant difference between high and low achiever college student on various personality profiles.

SAMPLE

A sample of 200 adolescents studying in B.A part I of different colleges of Ranchi town were selected on stratified random basis for the present study. The stratification was based on high achievers, who obtained marks above 65% and low achievers who obtained marks below 50% in their 12th class examination. One hundred students were high achievers and one hundred low achievers.

INSTRUMENT

1. **Academic Achievement:** - In the present investigation academic achievement constitutes the aggregate marks obtained by the subjects in their 12th class examination.
2. **16 Personality Factor Questionnaire (16 PF):**-In an effort to understand differing personalities in human being Raymond Bernard Cattell maintained a belief that a common taxonomy could be developed to explain such differences. This inventory has been developed on the basis of factor analysis. This inventory measures the personality on the basis of 16 independent factors. Three types of traits are included – Temperament trait, Ability trait and Dynamic trait. It has 187 items. Every question has 3 options. All the 16 factors give different information about the person. Data is analyzed on the basis of Norm chart. The sixteen personality factor questionnaire has been developed by Cattell (1946), adopted in Hindi by S. D. Kapoor (1970). This is one objectively scorable test devised by basic research in psychology to give the complete coverage of personality in brief time.

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The primary source by the 16 PF test. Traits covered

Factor	Low Sten Score Description (1-3)	High Sten Score Description (8-10)
A	Cool (Sizothymia)	Warm (Affectothymia)
B	Concrete thinking (Low scholastic mental capacity)	Abstract thinking (High scholastic mental capacity)
C	Affected by feelings (Low ego strength)	Emotional stable (Higher ego strength)
E	Submissive (Submissiveness)	Dominant (Dominance)
F	Sober (Desurgency)	Enthusiastic (Surgency)
G	Expedient (Weaker superego strength)	Conscientious (stronger superego strength)
H	Shy (Threctia)	Bold (Parmia)
I	Tough Minded (Harra)	Tender Minded (Premcia)
L	Trusting (Alexia)	Suspicious (Protension)
M	Practical (Praxernia)	Imaginative (Autia)
N	Forthright (Artlessness)	Shrewd (Shrewdness)
O	Self-assured (Untroubled adequacy)	Apprehensive (Guilt proneness)
Q ₁	Conservative (Conservatism)	Experimenting (Radicalism)
Q ₂	Group oriented (Group adherence)	Self-sufficient (Self –sufficiency)
Q ₃	Undisciplined self-conflict low integration	Following self – image (High self-concept control)
Q ₄	Released (Low ergic tension)	Tense (High ergic tension)

PROCEDURE

16 Personality Factor Questionnaire test was administered to the students with proper instruction. Data was collected and scoring was done with the help of scoring keys. The data obtained was tabulated and analyzed with the help of mean, S.D and t-ratio.

RESULT AND DISCUSSION

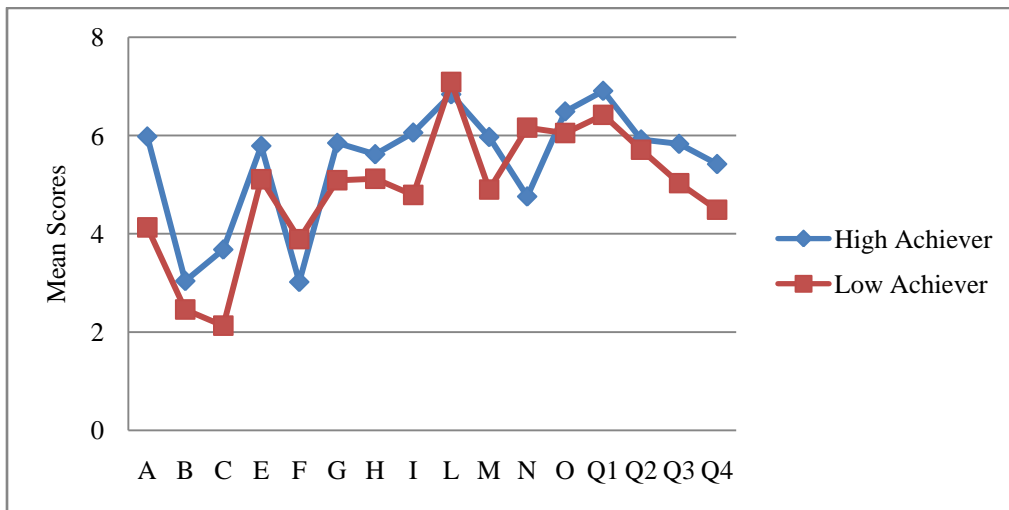
Table-1, Mean scores, SD and t values of high and low achiever college students on 16 personality factor questionnaire.

16 PF	Groups	N	Mean	SD	t	Level of significance
A	High Achiever	100	5.98	1.98	9.25	0.01
	Low Achiever	100	4.13	1.27		
B	High Achiever	100	3.04	1.69	3.41	0.01
	Low Achiever	100	2.46	1.51		

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C	High Achiever	100	3.68	1.89	7.04	0.01
	Low Achiever	100	2.13	1.58		
E	High Achiever	100	5.79	1.49	4	0.01
	Low Achiever	100	5.11	1.09		
F	High Achiever	100	3.02	1.35	4.35	0.01
	Low Achiever	100	3.89	1.89		
G	High Achiever	100	5.85	1.79	3.45	0.01
	Low Achiever	100	5.09	1.51		
H	High Achiever	100	5.62	1.71	2.10	0.05
	Low Achiever	100	5.12	1.69		
I	High Achiever	100	6.06	1.59	1.67	Not significant
	Low Achiever	100	4.79	1.31		
L	High Achiever	100	6.84	1.58	1.25	Not significant
	Low Achiever	100	7.09	1.60		
M	High Achiever	100	5.97	1.97	4.45	0.01
	Low Achiever	100	4.90	1.77		
N	High Achiever	100	4.76	2.03	5.38	0.01
	Low Achiever	100	6.16	1.78		
O	High Achiever	100	6.49	1.87	2	0.05
	Low Achiever	100	6.05	1.72		
Q ₁	High Achiever	100	6.91	1.75	2.04	0.05
	Low Achiever	100	6.42	1.81		
Q ₂	High Achiever	100	5.92	1.56	1.05	Not significant
	Low Achiever	100	5.71	1.61		
Q ₃	High Achiever	100	5.83	1.91	3.63	0.01
	Low Achiever	100	5.03	1.65		
Q ₄	High Achiever	100	5.42	1.51	5.47	0.01
	Low Achiever	100	4.49	1.03		

Figure-1, Mean scores of high and low achiever college students on 16 personality factor



The above table indicated that high and low achiever groups differ significantly on thirteen factors (A,B,C,E,F,G,H,M,N,O,Q₁,Q₃ and Q₄) out of sixteen personality factors. High and low

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achiever groups did not differ significantly in respect to various personality traits like factors- I, L and Q₂. Factor A showed reserved versus outgoing traits. In this factor high achiever groups had got high score. On factor B, high achievers group scored higher, they fall in the more intelligent category. High achiever groups scored higher on factor C, which indicates that they were emotionally more mature, realistic and adjustable than low achiever groups. Factor E showed humble versus assertive traits, in this factor high achiever groups scored high. It showed their dominant personality. On factor F, low achiever groups scored higher as compared high achievers. It indicated that low achiever groups were found to have sober, prudent, taciturn and serious than high achiever groups. On factor G, the high achievers group scored higher, it meant high achievers were found to have stronger super ego strength. On factor H, high achievers were found to be bold and uninhibited. Regarding factor M, high achiever group scored higher, it indicated that high achiever were more absent minded and careless. Factor N, low achievers group scored higher, they were found to be experienced and shrewd. On factor O, high achievers were scored higher, they having guilt proneness and depressed. Factor Q₁, high achievers group scored higher, having critical and liberal traits. On factor Q₃, high achievers were highly self-concept control than low achievers group. On factor Q₄, high achievers group scored higher, they were found to be tense and restless.

CONCLUSION

High achiever group was found to be reserved, detached, more intelligent, emotionally more mature, dominant in nature, stronger super ego strength, bold, careless, depressed, liberal in nature, higher self-concept and they were found to be tense and restless. Whereas low achiever group was sober, prudent, having doubtful personality and experienced.

REFERENCES

1. Anzi, F.O. (2005). Academic achievement and its relationship with anxiety, self-esteem, optimism, and pessimism in Kuwaiti students. *School Behavior and Personality*, 33, 95-104.
2. Barbaranelli, C., Caprara, G. V., Rabasca, A., & Pastorelli, C. (2003). A questionnaire for measuring the Big Five in late childhood. *Personality and Individual Differences*, 34, 645-664.
3. Blechner, Janet E. & Carter, Horold D. (1956) Rorschach personality factor and college achievement, *Calif. J. Educ. Res.*, 7, 72-75.
4. Cattell, R.B. (1978). Matched determiners vs. factor invariance: A reply to Korth. *Multivariate Behavioral Research*. 13(4): 431-448.
5. Crow, L. D. & Crow (1969). *Adolescent development and adjustment*, McGraw-Hill Book Company, United States. 45-49.
6. Day, D. and Silverman, S. (1989). Personality and Job performance: Evidence of Incremental Validity: *Personnel Psychology*, 42(1), 25-36.

Personality Traits and Academic Achievement among College Students

7. Digman, J.M. (1990). Personality structure: Emergence of the Five-factor model. *Annual Review of Psychology*, 41, 417-440
8. Eysenck, H.J. (1992). Personality and education: The influence of extraversion, neuroticism and psychoticism. *Zeitschrift fur Padagogische Psychologie*, 2, 133-144.
9. Goldberg, L.R. (1992). The Development of makers for the big five-factor structure, *Psychological Assessment*, 4, 26-42.
10. Hogan, J. & Hogan, R (1989).How to measure employee reliability.*Journal of Applied Psychology*, 74(2), 273-279.
11. Lawrence, G. (1997). *Looking at type and learning styles*. Gainesville, FL: Center for Application of Psychological Type.
12. Mouw, J.T. &Khana, R.K. (1993). Prediction of academic success: a review of the literature and some recommendations. *College Student Journal*, 3, 328-336.
13. Mullanattom, M. (1993).Personality.Bharananganam: Jeevan Books-80-83.
14. Myers, I.B., McCauley, M.H., Quenk, N.L & Hammer, A.L (1998).*MBTI manual: A guide to the development and use of Myers-Briggs Type Indicator* (3rd Ed.). Palo Alto, CA: Consulting psychologists Press.
15. Nofhle, E. E., & Robins, R. W. (2007). Personality predictors of academic outcomes: Big five correlates of GPA and SAT scores. *Journal of Personality and Social Psychology*, 93, 116–130.
16. Osborve R.T. and Sanders, W.B. (1949).Multiple choice Rorschach responses of college achievers ad non-achievers.*Educhol.Measmt*.9, 685-691.
17. Shoemaker, H.A. and Rohrer, J.H. (1948) Relationship between success the study of medicine and certain psychological and personal data. *J. Ass. Amer. Med. Coll.*, 23, 1-12.
18. Sopachak, Andrew L. (1958). Predication of college performance by commonly used test. *J. Clinc. Psychd*.14, 194-197.
19. Thompson, Grace M. (1947). Non-intellective factors and grades: the group Rorschach. *Amer. Psychologist* 2, 415.
20. Thompson, Grace M. (1948a). Non-intellective personality factors related to academic achievement in college. Doctor's thesis; University of California cited by Jonet E. Blechner and Harold D. Carter, Rorschach personality factor and college achievement. *Calif. J. Educ. Res.*, 1956, 7, 72-75.
21. Thompson, Grace M. (1948b). College grades and the group Rorschach.*J. Appl. Psychol.*, 32 398-407.
22. Thompson, Grace M. (1951). College grades and the group Rorschach: a follow-up study. *J. Genet. Psychol.*, 78, 39-46.
23. Witt, L.A &Barrick, M, Burke, L., & Mount, M. (2002).The interactive effects of conscientiousness and agreeableness on job performance.*Journal of Applied Psychology*, 87(1) 164-169
24. Woolfolk, A. (2001). *Educational psychology* (8th Ed.). Needham Heights, MA: Allyn& Bacon.

A Comparative Study of Suicide Tendency among Students in Relation to gender and residential area

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ABSTRACT

The goal of the present study was to note the effect of the gender (Male/ Female) and residential area (Rural/ Urban) on the suicide tendency of students. In view to above purpose the sample of 120 was selected by random sampling method. Suicide tendency Inventory standardized by Dr. G. R. Meghnathi (2002) Among the Students of Rajkot city and from its rural areas, was referred to have data regarding their suicide tendency and all the tow individual factors, obtained information was statistically analyzed by 't'-test effects were discovered. According to the results show that there is significant difference existed between male and female students, 't'-value 1.96 has been found significant at 0.05 level. So we concluded that female students showed higher level of suicide tendency then male students. Showed significant effect of area on suicide tendency. The 't'-value 3.39 has been found significant at 0.01 level. So we concluded that urban students showed higher level of suicide tendency then rural students.

Keywords: *Suicide Tendency, Gender and Residential Area*

INTRODUCTION

One of the basic desires of men is know of things around him. He wants to understand fully the things of the world. He asks so many questions such as why? How? When? of a thing. He is desirous of finding answers of such questions. The aim of the present investigation is effort to understand to the Suicidal Tendency in students of gender (Male/ Female) and residential area (Rural/ Urban)

Adolescence is very important period of one's life. It is stage when rapid changes take places. The individual's physical, mental, social, moral and spiritual outlooks undergo revolutionary changes. Such changes during adolescence are more rapid than during infancy. Due to this growth human personality develops new dimensions. Many parents fail to assess these changes and generally shoe difference because they do not like to take their control over their children. This attitude creates many difficulties for the adolescents. During adolescence the individual wants to take indecency and his emotional development will suffer and he may become short=tempered and aggressive.

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Consequently, social developments on correct lines will not be possible. Thus, the physical development of an adolescent is closely related to other developments. Here, one point is very important to discuss that physical disability is affect the behavior of s to adolescents.

The sources of frustration are many and diversified; the basic source which lies within many individual is mainly his/her personal disability, if any. Actually, the human organism is composed of numerous systems. Damage to any one of them may give rise to a disability. Every disability leads to problems in the entire spectrum of activities of an individual which is directly responsible for the behaviors that are called maladaptive. Evidence indicates and disorganizing (Shontz, 1970). It also plays a big role in the amount and direction of frustration. The reason behind this fact is that any defect which is derived from non-participation in activities common to those engaged in by normal individual is liable to create resentment and frustration (Wasserman and Rhiannon 1985). It is likely to influence his adjustment to people, circumstances and his self-perception which makes him more emotionally disturbed and frustrated.

Suicidal tendency has wide range of self-destructive behavior such as a personality trait; indicate some negative characteristics such as feelings of restlessness Boredom, lack of interest, vague fears and Anxieties etc. conflictive thought rebate to tension, Anxiety, and conflict, painful thought etc.

Dubey surendra N (1984) has studied on reaction to frustration among physically handicapped young adults in K. S. Saket Post Gradate Coll, India, studied with an Indian adaptation of the Rosenstein Picture- Frustration Study was administered to 25 physically handicapped and 25 nonhandiapped males(aged 18-22 yrs) matched on age, education, caste, and socioeconomic status(SES). Physically handicapped Ss were more ego defensive, “extragressive” and obstacle dominate as well as less “introgrSsessive” and need permissive than were nonhandiapped.

OBJECTIVES OF STUDY

1. To find signification mean difference on scores of suicide tendency with gender and residential area.
2. To explore the mean effect difference between the gender and resident areas students.
3. To suggestion steps for minimize suicide tendency.

STATEMENT OF THE RESEARCH PROBLEMS

"A Comparative Study of Suicide Tendency among Students in Relation to gender and Residential area"

A Comparative Study of Suicide Tendency among Students in Relation to gender and residential area

VARIABLES OF STUDY

- Independent variables
 1. Gender (Male/ Female)
 2. Residential area (Rural/ Urban)
- Dependent variable
 1. Suicide tendency

HYPOTHESES OF THEE RESEARCH STUDY

- 2.**Ho.1** There is no significant mean difference between Male and Female students there suicide tendency.
- 3.**Ho.2** There is no significant mean difference between Rural and Urban aria students there suicide tendency.

METHODOLOGY

Sample

Sample Procedure Simple Random Sampling design was selected for the present research work to fulfill this purpose. Firstly, to make a list of educational institutes, witches were located in the cities of Rajkot and other rural area of both districts. Then some colleges, schools and high schools were selected randomly.

- Research Design adopted in this study
- Major Statistical Techniques used in present research work are as follows.
- To measure, significant mean difference between two variables, the t-ratio was used.

Table – 1. Sample as per the plan

Type of Gender → area ↓ //Residential	Male	Female	Total
Rural	30	30	60
Urban	30	30	60
Total	60	60	120

TOOLS

1. Individual Information From
2. Suicide tendency Inventory

RESEARCH TOOLS

The Suicidal tendency was measured by Suicidal Tendency Scale (S T S) constructed and standardized by Bhatt and Meghnathi. The scale consists of 40 items out of which, each of the four modes of Suicidal Tendency has 10 items. The items of the scale has been selected on this basis of literature and judgment of expert, all the items of the scale are presented in simple and brisk style. S T S has four modes viz., (a) personality characteristic (b) Emotional Disturbances (c) Conflictive Thoughts, and (d) Self-harm Tendency. The preliminary scale with 80 items of STS was administered on Total Sample (N=140) selected items from various types of subjects group which are students of 11th to T.Y.B.A. (N=70). Lieral and illiberal person (N=40), physically Handicapped (N=20), Suicidal Attempters (N=10). The data were analyzed according to scoring key and prepared a merit list of scores and the Lower level Group (27%) Upper levels Group (27%) were indicated low scores. The Middle Group was not considered in this process. Finally 40 items were selected which was indicated 50 % (or nearly about 50%) quotient of D.V. and D.I. For the established the reliability co-efficient, the scale was administered to 160 subjects both males and females belonging to urban and rural area (Age range 16 to 30 yrs) the spilt-half reliability has been calculated by odd-even method. The correlation coefficient was 0.92 which indicated the STS is highly reliable. (Index of reliability was found 0.96).The test-retest reliability of this scale has also been calculated by administration twice of this scale on sample of 80 subjects the reliability coefficient was r. 0.83 (Index of reliability was 0.91). The validity of the scale has been calculated for the criterion validity. The scale was administered to two groups normal (N=40) and Abnormal (N=40). The t-test was applied for calculation of differences between above both groups there is (t ratio found 0.01) significant differences between normal and abnormal group was indicated high scores of suicidal tendency than normal group on the scale. The obtained scores for each of the four categories varied in between 10 to 40 high scores in each category is indicated high potentially of suicidal tendency. Norms are remained to be established. The scale is prepared in Gujarati version for Gujarati speaking population.

PROCEDURE AND METHOD OF ANALYSIS

Keeping in view the purpose the present study, the data collection was made by 2x2x1 factorial designed. Its analysis of t-test was done.

RESULTS AND DISCUSSION:

Table – 2, Sowing difference between the mean score

A Comparative Study of Suicide Tendency among Students in Relation to gender and residential area

Sr. No.	Students	N	Mean	S.D	't'	Level of Significance
1	Male	60	62.01	9	1.96	0.05
2	Female	60	65.50	10.5		

It indicates in table NO. 2 that "t" value of sex difference between the Mean Ss of boys and Female turned out to be in "t"=**1.96**. It is **0.05** level significance. It is greatly said that difference between the Male and Female in Suicide Tendency. Female in higher than Male of Suicide Tendency.

Table – 3, Sowing difference between the mean score

Residential area	N	M	SD	t	Sin. Level
Rural	60	58.58	7.82	3.39	0.01
Urban	60	53.93	7.17		

Table no.3 displays the type of the Residential area has the significant effect that a t-value =**3.39** is significant **0.01** level that mines Rural areas suicide tendency is higher than urban area.

CONCLUSION

1. In comparison to the male and female of suicide tendency that female are more suicide tendency than male
2. Also comparison suicide tendency in Residential area in rural areas suicide tendency is higher than urban area

REFERENCES

1. Practical consideration, Indian Journal of Clinical Psychology-15, 6-11.
2. R.G. Meghnathi (2004), Regional officer for south East Asia. New Delhi, Varma, S.K. (1988): Measurement of the positive mental health: Some Theoretical -A comparative study of **suicide tendency**
3. Reddy and Nagrathan (1993):, Mental health status among rural and urban teachers'. A Comparative study; Journal of the Indian Academy of applied Psychology Vol. 19, No. 1-2, P. 25-30.
4. Sell, H., Nagpal, R. (1992), Assessment of Subjective well-being inventory. World Health Organization

Predictors of Indulgence in Procrastinating Behaviour: Demographic Variables and Self-Esteem

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ABSTRACT

The study investigated demographic variables and self-esteem as predictors of indulgence in procrastinating behaviour. It utilized a correlation survey design involving two hundred and forty two sampled male (114) and female (128) civil servants in Ibadan, Oyo State, Nigeria. Data were collected from the sample using two scales. All the scales were re-validated. Seven hypotheses were tested. The results of simple regression analyses showed that both age and self-esteem independently predicted indulgence in procrastinating behaviour. Likewise, the results of t-test analysis revealed that marital status had significant influence on indulgence in procrastinating behaviour and that the single respondents indulged more in procrastination than married respondents. Further, the results of analysis of variance indicated that educational qualification had significant effect on indulgence in procrastinating behaviour. Multiple regression analysis results revealed that self-esteem, gender, age, marital status, educational qualification, and work experience jointly predicted indulgence in procrastinating behaviour and that only self-esteem and educational qualification independently predicted procrastination. The findings indicate that, self-esteem, and the listed demographic variables are significant predictors of indulgence in procrastinating behaviour among employees in this investigation. The study recommends that management and employers of labour should take cognizance of these predictors in their recruitment, training and development programs to enhance employees' output and lessen indulgence in procrastinating behaviour.

Keywords: *Demographic variables, self-esteem, indulgence in procrastinating behaviour*

INTRODUCTION

Procrastination is one of the numerous social phenomena that have since been neglected by the researchers in work organization. Procrastination like so many other psychological concepts has been variously defined. Different scholars from different backgrounds have offered their own meaning of the term and these different attempts by scholars to refine our understanding of procrastination have been complementary rather than contradictory. It should be noted, however, that one or more core or essential elements such as postponing, delaying, or putting off of a task or decision, in keeping with the term's Latin origins of pro, meaning "forward, forth, or in favour of,"

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-and crastinus, meaning “of tomorrow” (Klein, 1971) are recurrent themes in most definitions of procrastination.

Building on this foundation, an individual is said to procrastinate when she/he delays beginning or completing an intended course of action (Beswick & Mann, 1994; Ferrari, 1993a; Lay & Silverman, 1996; Milgram, 1991; Silver & Sabini, 1981). This is a useful distinction, as there are thousands of potential tasks that one could be doing at any time, and it becomes cumbersome to think that one is putting them all off. The distinction also separates procrastination from simple decision avoidance (Anderson, 2003), with which people’s original intention is to delay.

To Solomon and Rothblum, 1984 (as cited in Howell & Watson, 2007) procrastination is described as “the tendency to delay initiation or completion of important tasks to the point of discomfort”. Others state that procrastination refers to an inability to draw from past experience, leading procrastinators to underestimate the difficulty of the task at hand (Lay, 1986).

Popoola (2005) considers procrastination as a dispositional trait which has cognitive, behavioural and emotional components (as cited in Akinsola, 2007).

In the final analysis, procrastination is most often considered to be the irrational delay of behaviour (Akerlof, 1991; Burka & Yuen, 1983; Ellis & Knaus, 1977; Silver & Sabini, 1981), which reveals the dictionary meaning: “defer action, especially without good reason” (Oxford English Reference Dictionary, 1996). Being irrational involves choosing a course of action despite expecting that it will not maximize your utilities, that is, your interests, preferences, or goals of both a material (e.g., money) and a psychological (e.g., happiness) nature. Combining these elements suggest that to procrastinate is to voluntarily delay an intended course of action despite expecting to be worse off for the delay (Steel, 2007).

STATEMENT OF PROBLEM

Many organizations today are striving to maintain their competitive advantage over their competitors. These organizations depend heavily on their ever committed employees in order for them to accomplish this great fit. It is not surprising that, these employees are sometimes found to procrastinate in doing their assigned work tasks that are aimed to assist their organizations in maintaining their competitive edge over their competitors. This study therefore, is set to assess self-esteem and demographic variables as predictors of indulgence in procrastinating behaviour among employees.

OBJECTIVES OF STUDY

In order to test the hypotheses formulated for this study, the specific objective is to examine whether self-esteem will independently predict indulgence in procrastinating behaviour, and to critically evaluate whether demographic variables and self-esteem will jointly predict indulgence in procrastinating behaviour significantly.

THEORETICAL BACKGROUND

Appraisal-anxiety theory proposes that procrastination is a function of cognitive evaluation of task by the procrastinators (Lazarus and Folkman, 1984). According to the theory, when an individual is presented with challenging task (say writing an ‘award winning’ research proposal

or methodology), the individual first evaluates whether she/he has the capability to cope with the task. If the individual perceives that she/he cannot successfully deal with the task, then the outcome is feelings of anxiety and the behavioural response of escape or avoidance behaviours (that is procrastination) (Lazarus and Folkman, 1984). Appraisal-anxiety theory emphasizes the role of self-efficacy (a form of situational self-esteem Korman, 1970, and 1976) in procrastination. According to the theory, employees will indulge in procrastinating behaviour when they perceived that they lack the requisite skills to get task at hand to be accomplished. For example, an employee may be well talented and always willing to do his/her work but do not believe in his/her ability to successfully perform the job and as a result of this, he/or she kept postponing doing the job. The assertion of appraisal-anxiety theory is in line with the findings of Steel (2007) who found that low self-efficacy and low self-esteem are associated with procrastination. The theory has been able to show that employees procrastinate when they perceived that they lack the required skills to perform needed tasks they ought to perform.

One of the earliest attempts to explain the dynamics of procrastination was made by psychoanalytic theorists. Freud (1953) was the first who explained the avoidance behaviours with the role of anxiety. He stated that tasks are avoided primarily because they are threatening to the ego. Through delaying, the ego is protected from the risk of possible failure. Similarly, recently, Birder (1993) suggested that procrastination is a defence against impulses and separation. It is a result of psychologically or physically dangerous maturation and growth process. Hence, procrastinators can be seen as passive children who are hesitate to assert themselves actively. Nevertheless, one of the obvious problems with the psychoanalytic theory is its difficulty to empirically test (Ferrari et al., 1995).

One of the most popular theories about the origin of procrastination is that procrastination is a self-protection of fragile self-esteem (Burka & Yuen, 1983; Tice, 1991). The theory proposed that performance is reflection of ability (efficacy) which is also a reflection of self-worth. This declaration reveals an equation among performance, ability and self-worth. Hence, failure at a task becomes an indicator of lack of efficacy and a low self-esteem. Consequently, the employees develop a fear of failure due to the emphasis placed on success in defining self-esteem and procrastination interrupts the equation. Since performance has been impaired by time constraints; performance does not equal ability and therefore does not equal self-esteem. In this way, procrastination serves as an ego defensive function. Hence, procrastination is used as a protective device by people with fragile self-esteem.

This approach again, reveals the important role of efficacy and self-esteem in employees' procrastination. Nevertheless, the theory is hard to verify.

In summary, there is some evidence to suggest that procrastination is a phenomenon that is wide in scope more than the way it had been traditionally discussed in the specific theories. The scope of procrastination should be expanded beyond the specifically focusing on anxiety, control, and motivation. Therefore, procrastination should be investigated by focused on an approach which covers possibly all related constructs. In this respect, the paper focused on the multiple predictors

of procrastinating behaviour by approaching self-esteem, age, gender, work experience, educational qualification, and marital status to understand procrastination more comprehensively.

LITERATURE REVIEW

Available literature regarding indulgence in procrastinating behaviour shows that much of the research is a recent endeavour. According to Knaus (2000), ‘prior to 1979, procrastination received limited attention in the United States’. As late as 2005, Ferrari, O’Callaghan and Newbegin wrote that ‘no systematic study has examined global prevalence of chronic procrastination- purposeful delay in starting or completing tasks’. Obviously, every person indulges in procrastinating behaviour on occasion. An individual may put forward doing something he/she doesn’t find pleasant or that he/she feels forced by others to do (a form of mini-rebellion against authority). But, such delays do not make such individual a chronic procrastinator. According to Ferrari (2010), the chronic procrastinator, accepts delay as a maladaptive way of life across a variety of settings. Chronic procrastinators delay at home, school, work, in relationships with family and friends, in how they decide to do (or not do) tasks.

Some scholars noted that procrastination as a problem extends far beyond academic institutional settings: they admitted that procrastination chronically affects 15-20% of adults (Harriott & Ferrari, 1996; Steel, 2007). And it predicts decreased work (Ellis & Knaus, in press; Robb, 1998, as cited in Knaus, 2000) and academic performance (Owens & Newbegin, 1977, as cited in Knaus, 2000). Ferrari, O’Callaghan and Newbegin (2005) found that it is more likely to be reported by white collar as compared to blue collar workers (Hammer and Ferrari, 2002, as cited in Ferrari, O’Callaghan and Newbegin, 2005). Some eminent scholars reported that independent of fear of failure, self-efficacy and self-esteem are directly linked to procrastination and performance (Bandura, 1997; Burka & Yuen, 1983; Judge & Bono, 2001). Numerous results of studies show that the core of procrastination is impulsiveness and related traits such as low self-esteem, poor self-control and distractibility (Steel, 2011).

Guindon (2010) suggested that what individuals choose to do and the way they do it depend on their self-esteem. The conceptualizations of self-esteem have been inconsistent. Countless of studies (Beck et al., 2000; Eggens, van der Werf, & Bosker, 2008; Klassen et al., 2008), for example, suggested self-esteem as the antecedent of performance; while others view it as consequent component. Some of the recent studies, on the other hand, suggested that self-esteem is a mediator between the emotions and behaviours.

Self-esteem has been considered an important contributing factor to the explanation of procrastination. It refers to judgments of global self-worth (Rosenberg, 1965). Burka and Yuen (1983, as cited in Özer, 2010) suggested that individuals procrastinate to protect their fragile sense of self-esteem. In the study conducted by Beswick et al. (1988), self-esteem was one of the three possible explanations for procrastination along with irrational beliefs. Flett, Blankstein, and

Martin (1995) suggested that procrastinators suffer from lower level of self-esteem which cause to a general tendency to turn it in behaviour like task delay or avoidance that protect self-presentation by providing an excuse for poor performance and negative outcomes. In this respect, numerous studies have found a significant inverse relationship between academic procrastination and self-esteem (e.g., Ferrari, 1994; Ferrari, 2001), whereby feelings of worthlessness cause to task avoidance that might results in failure (Ferrari, 2000).

The relationship between procrastinating behaviour and self-esteem has received considerable attention in the procrastination literature (Beck et al., 2000; Effert & Ferrari, 1989; Ferrari, 2000; Solomon & Rothblum, 1984), with the results showing negative correlation with procrastination. On the contrary to general findings, Beck, et al. (2000) did not find significant correlation between self-esteem and procrastination.

According to Steel (2007) procrastination appears to decrease with age ($r = -.15$). Likewise, U.S. Census Bureau (2000) found a significant negative relationship between age and procrastination. To Steel and Ferrari (2013), there is a significant association between procrastinating behaviour and young, single men with less education residing in countries with lower levels of self-discipline.

The expected influence of gender on procrastination is difficult to predict. Feingold (1994) study on gender differences and the related construct of self-control showed mixed results. Men may score higher, lower, or the same as women depending on the measure.

As per marital status in relation to academic performance several studies had showed that, married (men and women) undergraduates performed better compare to single (unmarried). For instance Smith and Naylor (2001) examined data of all the students who graduated from all the UK universities in 1993 and found that married students (men and women) do better than unmarried (single) students. In 2010, Al-Mutairi reported married students at the AOU outperforming their unmarried (single) counterparts and concluded that marital status plays critical role in predicting students' academic performance.

Conclusively, it must be emphasized that, self-esteem plays a vital role in employees' indulgence in procrastinating behaviour. At present, little or nothing has been done in regards to the influence of demographic variables on procrastinating behaviour. The current study examined the independent and joint influence of demographic variables and self-esteem on employees' indulgence in procrastinating behaviour.

HYPOTHESIS

1. Self-esteem will independently predict employees' indulgence in procrastinating behaviour significantly.
2. Employees' age will independently predict indulgence in procrastinating behaviour significantly.

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3. Gender will independently predict employees' indulgence in procrastinating behaviour significantly.
4. There will be significant difference between single and married employees' in their indulgence in procrastinating behaviour.
5. Educational qualification will have a significant effect on employees' indulgence in procrastinating behaviour.
6. Work experience will have a significant effect on employees' indulgence in procrastinating behaviour.
7. Self-esteem, age, gender, marital status, educational qualification, and work experience will jointly predict employees' indulgence in procrastinating behaviour significantly.

Findings of this study will add to scanty data on demographic factors in relation to indulgence in procrastinating behaviour and facilitate the effective utilization of demographic variables as human resource development tool. The study will also assist employees and researchers as well in fashioning out effective ways in surmounting impediments to performance, thus informing policy makers.

METHOD

Design and setting

This study utilized the correlational survey design; data on all variables were collected as they occurred in everyday work situation. The independent variables under consideration were demographic variables and self-esteem. The dependent variable was indulgence in procrastinating behaviour and this was measured based on each participant's score on Tuckman's (1991) 16-item procrastination scale.

The study was carried out among Oyo State civil servants working in the State Secretariat, Ibadan, Oyo State, Nigeria. The respondents were drawn from different cadres of civil servants - junior, intermediate and senior cadres.

Participants of the Study

Two hundred and forty two (242) civil servants (male: 128 and female: 114) were conveniently sampled from five (5) different ministries (Trade, Investments and Cooperatives, Justice, Education, Women Affairs, Community Development and Social Welfare, and Lands and Housing) in Oyo State civil service, Nigeria. One of the inclusion criteria was that the participants must be above 18 years of age; this is simply because 18 is the constitutional adult age in Nigeria. Also participant must be able to read and write English, which is the official language in the country. One hundred and sixty two (66.9%) of the respondents were married and 80 (33.1%) of them were single. The respondents' ages ranged from 19 to 59. Their mean age was 35.64 (SD = 10.66). Three (1.2%) of the respondent had primary school education, 22 (9.1%) had Ordinary National Diploma (OND), 130 (53.7%) had Higher National Diploma/Bachelor of Science Degree (HND/BSc.), and 17 (7.0%) had Masters of Science Degree/Doctor of Philosophy (MSc./PhD). However, 3 (1.2%) of the respondents did not

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indicate their academic attainment. Forty seven (19.4%) of the respondents had spent less than one year in active service, 63 (26.0%) between one and five years, 39 (16.1%) between six and ten years, 22 (9.1%) between eleven and fifteen years, 64 (26.4%) sixteen years and more, finally, 7 (2.9%) of the respondents did not indicate the number of year (s) they have spent in active service.

Instruments

Two validated scales were used for data collection on the variables of interest.

Demographic data: The demographic variables taped include sex, age, marital status, religion, educational qualification, and work experience.

Self-esteem

Self-esteem was measured with a 10-item self reported Likert Scale, developed by Rosenberg (1965). The scale has an alpha reliability of 0.90. A Cronbach's alpha of 0.68 was established with the present population. It is a 4-point scale, for items 1, 2, 4, 6, and 7: Strongly agree = 3, Agree = 2, Disagree = 1, Strongly disagree = 0, for items 3, 5, 8, 9, and 10 (which are reversed in valence): Strongly agree = 0, Agree = 1, Disagree = 2, Strongly disagree = 3 with a possible total of 30 (e.g. all in all, I am inclined to feel that I am a failure). An individual who scored within the mean or above the mean was regarded as having high self-esteem, while those who scored below the mean we're be considered to be low on self-esteem.

Indulgence in procrastinating behaviour

Tuckman (1991)'s procrastination scale (TPS16) was used to measure civil servants' tendency to indulge in procrastinating behaviour. This scale is a 35-item originally, 4-point, Liker-type scale with a reliability coefficient of 0.90. Using factor analysis, Tuckman reduced this original 35-item scale to 16-item scale consisting of items that loaded 0.40 or higher with an alpha reliability of 0.86. Using the Tuckman's 16-item scale, a Cronbach's alpha of 0.69 was obtained for this current research. The 16-item takes lesser time to administer than the 35-item scale. The scale is anchored at "1" by "that's not me for sure" and at "4" by "That's me for sure" (e.g. I needlessly delay finishing jobs, even though they are important). The 16-item scale was used to determine civil servants' tendency to indulge in procrastinating behaviour. The scale ranged from 16-64. Participants who scored between 57 and 64 were said to be high on indulgence in procrastination, while those who scored 34-49 were regarded to be low on indulgence in procrastination.

Sampling Procedure

The study adopted a multistage sampling procedure. Different sampling technique was used at different points of the selection of participants and government ministries. The convenient

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sampling method was used to select the civil servants. A simple random sampling was used in selecting the government ministries and agencies.

Data Analysis

Data received from questionnaire distributed was coded and finally analyzed using IBM-Statistical Package for Social Sciences (SPSS) version 20. Hypotheses 1, 2, and 3 were analyzed with the aid of Simple Regression Analysis. Hypothesis 4 was analyzed using Independent t-test statistics. Hypotheses 5 and 6 were analyzed with the aid of One-Way Analysis of Variance. Multiple Regression Analysis was finally applied on hypothesis 7.

RESULTS

This section presents the results of data analyses performed on the data collected.

Table 1: **Summary of Simple Regression Analysis using Self-esteem to predict Indulgence in Procrastinating Behaviour**

Predictor	R	R ²	F	β	t	P
Self-esteem	.22	.05	12.67	-.22	18.89	< .001

***p<.001

Hypothesis one which stated that, self-esteem will independently predict employees' indulgence in procrastinating behaviour significantly was confirmed { $R^2 = .050$, $F(1,240) = 12.67$; $p < .001$ }. Observation of the beta value ($\beta = -.22$) revealed further that, the higher the employees' indulgence in procrastinating behaviour the lower their self-esteem vice versa. Table 1 also showed that, 5.0% variance in respondents' indulgence in procrastinating behaviour was accounted for by the respondents' self-esteem.

Table 2: **Summary of Simple Regression Analysis using Age to predict Indulgence in Procrastinating Behaviour**

Predictor	R	R ²	F	β	t	P
Age	.152	.023	5.40	-.152	-2.32	<.05

*p<.05

Hypothesis two which stated that, employees' age will independently predict indulgence in procrastinating behaviour significantly was supported { $R^2 = .023$, $F(1,240) = 5.40$; $p < .05$ }. This means that, age is a significant predictor of employees' indulgence in procrastinating behaviour. Table 2 indicated that, 2.3% variability in participants' indulgence in procrastinating behaviour

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was attributable to the participants' age. Again, observation of the beta value showed that, the higher the employees' age, the lower their indulgence in procrastinating behaviour vice versa.

Table 3: Summary of Simple Regression Analysis using Gender to predict Indulgence in Procrastinating Behaviour

Predictor	R	R ²	F	β	t	P
Gender	.103	.011	2.55	-.103	-1.60	> .05

*p>.05

Hypothesis three which stated that, gender will independently predict employees' indulgence in procrastinating behaviour significantly was rejected ($R^2 = .011$, $F(1,240) = 2.55$; $p > .05$). This implies that gender was not critical in predicting civil servants' indulgence in procrastinating behaviour. It also means that, males and females civil servants were not significantly different in their indulgence in procrastinating behaviour.

Table 4: Summary of Independent t-Test Showing Influence of Marital Status on Indulgence in Procrastinating Behaviour

IPB.	N	\bar{X}	df	t	P
Single	80	34.66	240	2.43	< .05
Married	162	32.27			

*P < .05, IPB= Indulgence in Procrastinating Behaviour

Hypothesis four which stated that, there will be significant difference between single and married employees' in their indulgence in procrastinating behaviour was accepted ($t(240) = 2.43$; $p < .05$). The results of Table 4 showed that, marital status had significant influence on employees' indulgence in procrastinating behaviour and that there single and married civil servants were significantly different in their indulgence in procrastinating behaviour. Observation of the mean scores further revealed that, single civil servants ($\bar{X} = 34.66$) indulged more significantly in procrastinating behaviour than married civil servants ($\bar{X} = 32.37$).

Table 5: Summary of One-Way ANOVA Showing Influence of Educational Qualification on Indulgence in Procrastinating Behaviour

Source	SS	df	MS	F	P
Between Groups	591.41	4	147.85	2.93	< .05
Within Groups	11813.85	234	50.49		
Total	12405.26	238			

*p<.05

Table 5.1: LSD Multiple Comparison Showing the Effect of Educational Qualification on Indulgence in Procrastinating Behaviour

Variables	\bar{X}	Mean Difference				
		1	2	3	4	5
1. Primary	33.67	--				
2. Secondary	34.95	-1.29	--			
3. OND	34.15	-.48	.81	--		
4. HND/B.Sc.	33.05	.62	1.91	1.10	--	
5. M.Sc./PhD	28.00	5.57	6.96*	6.15*	5.05*	--

*Mean is significant at 0.05 level

Hypothesis five which stated that, educational qualification will have a significant effect on employees' indulgence in procrastinating behaviour was confirmed {F (4, 234) = 2.93; p < .05}. This means that, educational attainment of the employees significantly affect their indulgence in procrastinating behaviour.

Furthermore, Table 5.1 revealed that, there was significant difference in indulgence in procrastinating behaviour between employees that possessed Secondary School Examination Certificate ($\bar{X} = 34.95$) and employees that had M.Sc./PhD degree ($\bar{X} = 28.00$) with mean difference of 6.96. Observation of the mean scores showed further that, employees that possessed Secondary School Examination Certificate ($\bar{X} = 34.95$) significantly indulged in procrastinating behaviour than employees that had M.Sc./PhD degree ($\bar{X} = 28.00$).

Likewise, Table 5.1 showed that, there was significant difference in indulgence in procrastinating behaviour between employees that, had Ordinary National Diploma Certificate ($\bar{X} = 34.15$) and employees that possessed M.Sc./PhD degree ($\bar{X} = 28.00$) with mean difference of 6.15. Observation of the mean scores also showed that, employees with Ordinary National

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Diploma Certificate ($\bar{X} = 34.15$) significantly indulged in procrastinating behaviour than employees with M.Sc./PhD degree ($\bar{X} = 28.00$).

Finally, Table 5.1 indicated that, there was significant difference in indulgence in procrastinating behaviour between employees that, possessed Higher National Diploma Certificate/B.Sc. degree ($\bar{X} = 33.05$) and employees with M.Sc./PhD degree ($\bar{X} = 28.00$) with mean difference of 5.05. Observation of the mean scores indicated that, employee with Higher National Diploma Certificate/B.Sc. degree ($\bar{X} = 33.05$) significantly indulged in procrastinating behaviour than employees with M.Sc./PhD degree ($\bar{X} = 28.00$).

Table 6: Summary of One-Way ANOVA Showing Influence of Work Experience on Indulgence in Procrastinating Behaviour

Source	SS	df	MS	F	P
Between Groups	390.35	4	97.59	1.90	> .05
Within Groups	11799.50	230	51.30		
Total	12189.85	234			

* $p < .05$

Hypothesis six which stated that, work experience will have a significant effect on employees' indulgence in procrastinating behaviour was not supported $\{F(4, 230) = 1.90; p > .05\}$. Thus work experience did not have a significant effect on employees' indulgence in procrastinating behaviour.

Table 7: Summary of Multiple Regression Analysis using Self-esteem, Age, Gender, Marital Status, Educational Qualification, and Work Experience to predict Indulgence in Procrastinating Behaviour

Predictors	R	R ²	F	P	β	t	P
Self-esteem					-.21	-3.30	< .001
Gender					-.09	-1.34	> .05
Age					-.09	-.81	> .05
	.37	.14	5.84	< .001			
Marital Status					-.10	-1.22	> .05
Edu.Qulif.					-.19	-2.10	< .01
Work Exp.					-.04	-.37	> .05

* $P < .05$; ** $P < .01$; *** $P < .001$, Edu Qualif. = Educational Qualification, Work Exp. = Work Experience

Hypothesis seven which stated that, Self-esteem, age, gender, marital status, educational qualification, and work experience will jointly predict employees' indulgence in procrastinating behaviour significantly was affirmed ($R^2 = .14$, $F(6, 215) = 5.84$; $p < .001$). The results imply that, Self-esteem, age, gender, marital status, educational qualification, and work experience jointly predicted employees' indulgence in procrastinating behaviour. The results also showed that, 14% variance in the sampled respondents' were jointly contributed by the predictors.

DISCUSSION

The study examined demographic variables and self-esteem as predictors of indulgence in procrastinating behaviour.

The analysis of results revealed that, self-esteem independently predicted employees' indulgence in procrastinating behaviour significantly. It was also showed that employees with low self-esteem indulged in procrastinating behaviour more significantly than employees with high self-esteem. These results imply that, the extent to which employee sees her or himself as a valuable and worthy individual is critical in explaining procrastinating behaviour. The findings of this research are in line with the findings of Adu and Shenge (2012) who found that, certain psychological factors (self-esteem, self-efficacy, and self-regulation) are significant in explaining indulgence in procrastinating behaviour. The results of this research are alike with the findings of Guindon (2010) who suggested that what individuals choose to do and the way they do it depend on their self-esteem. The results also re-echoed the findings of Steel (2011) who emphasized that impulsiveness and related traits such as low self-esteem, poor self-control and distractibility are core to procrastinating behaviour.

The hypothesis that stated that, employees' age will independently predict indulgence in procrastinating behaviour significantly was affirmed. The findings likewise revealed that, indulgence in procrastinating behaviour decrease with age. The reason for this may be that, as an employee increases in age, he/she becomes more adjusted, gets more realistic value and worth of self and better understanding of whatever (including employment) he/she is doing and as a result has little or no time to push forward what he/she is expected to do. The results of this study are in line with the findings of Steel (2007) who found that, procrastination appears to decrease with age ($r = -.15$). Likewise it supports U.S. Census Bureau (2000) which found a significant negative relationship between age and procrastination. The finding also supports the finding of Steel and Ferrari (2013) who found that, procrastination tended to associate with the young people.

The hypothesis that stated that, there will be a significant difference between single and married employees' in their indulgence in procrastinating behaviour was accepted. It was likewise

showed in the analysis of the results that, single employees significantly indulged in procrastinating behaviour more than married employees. The reason for this kind of results may be that, single employees may be having the feelings that, no children or intimate family members to distract them from doing whatever task they want to do at any point in time and as a result of this push forward what they ought to do now to a more “convenient time”. For the married employees, they may have the feelings that, pushing forward what they ought to do now to a more “convenient time” may be dangerous as children or spouse may not give them the opportunity to have that more “convenient time”. This finding supports the finding of Steel and Ferrari (2013) who found that, procrastination is associated with single young men.

The hypothesis that stated that, educational qualification will have a significant effect on employees’ indulgence in procrastinating behaviour was also confirmed and the results further revealed that, employees with Secondary School Certificate, OND, HND/B.SC degree significantly indulged in procrastinating behaviour more than employees with M.Sc./PhD degree. The reason for this may be that, employees with M.Sc./PhD degree had acquired sufficient professional/educational qualifications coupled with adequate career experiences which gave them enough mastery of their work assignments and as a result capable of performing their work duties without delay. The finding of this study is consistent with the finding of Steel and Ferrari (2013) who found a significant correlation between procrastination and people with less education.

In order to examine the joint contribution of all of the predictor variables of interest to employees’ indulgence in procrastinating behaviour, multiple regression analysis was performed. Self-esteem, age, gender, marital status, educational qualification, and work experience were entered into the regression equation. The regression model summarized in Table 7 accounted for 14% variance in indulgence in procrastinating behaviour. This finding is congruent with that of Steel and Ferrari (2013). Steel and Ferrari (2013) found that, procrastinating behaviour is associated with young, single men with less education residing in countries with lower levels of self-discipline.

CONCLUSION

In conclusion, the present study indicated that self-esteem is a predictor of indulgence in procrastinating behaviour. Thus it is important that, employees see themselves as worthy and valuable individuals in order to lessen their tendencies to indulge in procrastinating behaviour. Results from the study also suggest that, some demographic factors (e.g. gender, age, marital status, work experience, and educational qualification) are capable of predisposing employees to indulgence in procrastinating behaviour. Thus management and employers of labour should look for reasonable ways of balance things up in order to lessen, if not totally eliminating indulgence in procrastinating behaviour in their workforce. Management can achieve all of these by providing the employees with learning environment and also provide rooms for employees’ training and development. This can come in form of allowing the employees to go for result oriented professional/educational training that would afford them (the employees) to acquire

requisite skills that would be of tremendous help to performing their work assignments without delay.

REFERENCES

1. Akerlof, G., (1991), "Procrastination and Obedience," *American Economic Review*, **81**, 1-19.
2. Akinsola, M. K. , Tella, A., Tella, A. (2007). Correlates of academic procrastination and mathematics achievement of university undergraduate students. *Eurasia Journal of Mathematics, Science & Technology Education*, **3**(4), 363-370.
3. Al-Mutairi, A. (2010). Factors Affecting Business Students' Performance in Arab Open University: The Case of Kuwait. *International Journal of Business Management*, **6**(5), 146 - 155.
4. Anderson, C. J. (2003). The psychology of doing nothing: Forms of decision avoidance result from reason and emotion. *Psychological Bulletin*, **129**, 139–167.
5. Bandura, A. (1977). Social learning theory. Englewood Cliffs, NJ: Prentice-Hall.
6. Bandura, A. (1997). *Self-efficacy: The exercise of control*. New York: Freeman.
7. Beck, B. L., Koons, S. R., & Milgrim, D. L. (2000). Correlates and consequences of behavioural procrastination: The effects of academic procrastination, self-consciousness, self-esteem and self-handicapping. *Journal of Social Behaviour & Personality*, **15**(5), 3-13.
8. Beswick, G., & Mann, L. (1994). State orientation and procrastination. In *procrastination: A structural equation model*. Unpublished master's thesis, University of Guelph, Ontario, Canada.
9. Birder, L. (1993). Procrastination: Its role in transference and countertransference. *Psychoanalytic Review*, **80**(4), 541-558.
10. Burka, J. B., & Yuen, L. M. (1983). *Procrastination: Why you do it, what to do about it*. Reading, MA: Addison-Wesley.
11. Effert, B. R., & Ferrari, J. R. (1989). Decisional Procrastination - Examining Personality-Correlates. *Journal of Social Behaviour and Personality*, **4**(1)151-156.
12. Eggens, L., van der Werf, M. P. C., & Bosker, R. J. (2008). The influence of personal networks and social support on study attainment of students in university education. *Higher Education*, **55**(5), 553-573.
13. Ellis, A., & Knaus, W. J. (1977). Overcoming procrastination. New York: Signet Books.
14. Feingold, A. (1994). Gender differences in personality: A meta-analysis. *Psychological Bulletin*, **116**, 429–526.
15. Ferrari, J. R. (1993a). Christmas and procrastination: Explaining lack of diligence at a "real world" task deadline. *Personality and Individual Differences*, **14**, 25–33.
16. Ferrari, J. R. (1994). Dysfunctional procrastination and Its relationship with self-esteem, interpersonal dependency, and self-defeating behaviours. *Personality and Individual Differences*, **17**(5), 673-679.

17. Ferrari, J. R. (2001). Procrastination and attention: Factor analysis of attention deficit, boredomness, intelligence, self-esteem, and task delay frequencies. *Journal of Social Behaviour & Personality*, 16, 185-196.
18. Ferrari, J. R., Johnson, J. L., & McCown, W. G. (1995). Procrastination and task avoidance: Theory, research, and treatment. New York: Plenum Press.
19. Ferrari, J. R., O'Callaghan, J. & Newbegin, I. (2005). Prevalence of procrastination in the United States, United Kingdom, and Australia: Arousal and avoidance delays among adults. *North American Journal of Psychology*, 7(1), 1-6.
20. Ferrari, J.F. (2000). Procrastination and attention: Factor analysis of attention deficit, boredomness, intelligence, self-esteem, and task delay frequencies. *Journal of Social Behaviour and Personality*, 15, 185-196.
21. Flett, G. L., Blankstein, K. R., & Martin, T. R. (1995). Procrastination, negative self-evaluation, and depression: A review and preliminary model. In J. Ferrari, J. Johnson & W. McCown (Eds.), *Procrastination and task avoidance: Theory, research, and treatment* (pp. 137-167). NY: Plenum Press.
22. Freud, S. (1953). Inhibitions, symptoms and anxiety in collected works. London: Hogards.
23. Guindon, M. H. (2010). What is self-esteem? In M. H. Guindon (Ed.), *Self-esteem: Across the life span*.
24. Hammer, C. A., & Ferrari, J. R. (2002). Differential incidence of procrastination between blue-collar and white-collar workers. *Current Psychology: Developmental, Learning, Personality, Social*, 21(4), 333-338.
25. Harriott, J., & Ferrari, J. R. (1996). Prevalence of procrastination among samples of adults. *Psychological Reports*, 78(2), 611-616.
26. Howell, A. J., & Watson, D. C. (2007). Procrastination: associations with achievement goal orientation and learning strategies. *Personality and Individual Differences*, 43, 167–178.
27. Judge, T. A., & Bono, J. E. (2001). Relationship of core self-evaluations traits – self-esteem, generalized self-efficacy, locus of control, and emotional stability – with job satisfaction and job performance: A meta-analysis. *Journal of Applied Psychology*, 86, 80-92.
28. Klassen, R., Krawchuk, L. & Rajani, S. (2008). Academic procrastination of undergraduates: Low self-efficacy to self-regulate predicts higher levels of procrastination. *Contemporary Educational Psychology*, 33, 915-931.
29. Klein, E. (1971). A comprehensive etymological dictionary of the English language. New York: Elsevier.
30. Knaus, W. J. (2000). Procrastination, blame, and change. *Journal of Social Behaviour & Personality*, 15(5), 153-166.
31. Korman, A. K. (1970). Toward a hypothesis of work behavior. *Journal of Applied Psychology*, 54, 31–41.
32. Korman, A. K. (1976). Hypothesis of work behaviour revisited and an extension. *Academy of Management Review*, 1, 50–63.

33. Lay, C. (1986). At last, my research article on procrastination. *Journal of Research in Personality*, 20, 474-495.
34. Lay, C. H., & Silverman, S. (1996). Trait procrastination, anxiety, and dilatory behaviour. *Personality and Individual Differences*, 21, 61-67.
35. Lazarus, R.S., & Folkman, S. (1984). Stress, appraisal, and coping. New York: Springer.
36. Milgram, N. A., Dangour, W., & Raviv, A. (1991). Situational and personal determinants of academic procrastination. *The Journal of General Psychology*, 119(2), 123-133.
37. Oxford English reference dictionary (2nd ed.). (1996). New York: Oxford University Press.
38. Ozer, B. U. (2010). A path analytic model of procrastination: testing cognitive, affective, and behavioural components. An unpolished doctorate degree thesis, Middle East Technical University.
39. Popoola, B. I. (2005). A study of the relationship between procrastinatory behaviour and academic performance of undergraduate students in a Nigerian University. *African Symposium: An online Journal of Educational Research Network*. [Online] Available: <http://www2>.
40. Rosenberg, M. J. (1965). When dissonance fails: On eliminating evaluation apprehension from attitude measurement. *Journal of Personality and Social Psychology*, 1, 28-43.
41. Silver, M., & Sabini, J. (1981). Procrastinating. *Journal for the Theory of Social Behaviour*, 11, 207-221.
42. Smith, J., & Naylor, R. (2001). Determinants of degree performance in UK universities: a statistical analysis of the 1993 cohort. *Oxford Bulletin of Economics and Statistics*, 63(1), 29-60.
43. Solomon, L. & Rothblum, E. (1984). Academic procrastination: Frequency and cognitive behavioural correlates. *Journal of Counseling Psychology*, 31(4), 503-509.
44. Steel, P. (2007). The nature of procrastination: A meta analytic and theoretical review of quintessential self-regulatory failure. *Psychological Bulletin*, 133(1), 65-94.
45. Steel, P. (2011). *Uitstel gedrag: waarom we lastige dingen voor ons uit schuiven en hoe we hiervan afkomen [The Procrastination Equation: How to Stop Putting Things Off and Start Getting Stuff Done]*. Amsterdam, The Netherlands: Ten Have.
46. Steel, P. and Ferrari, J. (2013). Sex, education and procrastination: An epidemiological study of procrastinators' characteristics from a global sample. *European Journal of Personality*, 27(1), 51-58.
47. Tice, D. M. (1991). Esteem protection or enhancement: Self-handicapping motives and attributions differ by trait self-esteem. *Journal of Personality and Social Psychology*, 60(5), 711-725.
48. Tuckman, B. W. (1991). The development and concurrent validity of the Procrastination Scale. *Educational and Psychological Measurement*, 51, 473-480.
49. U.S. Census Bureau. (2000). *Midyear population, by age and sex*. Retrieved January 4, 2014, from <http://www.census.gov/ipc/www/idbconf.html>.

The Concept of Adhyas in Sankar and Post Sankar Vedanta

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Keywords: *Adhyas and post Sankar*

INTRODUCTION

In any consistence metaphysical system, the three basic ingredients, Methodology, epistemology and ontology must exists harmoniously. The system Sankar Vedanta is closely connected with her non dualistic ontology and its epistemological position clearly implies a strict monism. Moreover, the epistemological issues in Sankar Vedanta have a certain definite contemporary significance. It is also use full to compare the point with the philosophical position of Kant.

The central question which we want to discuss with reference to these three epistemologies is does the act of observation make a difference in the thing or system which is under the observation of an observer? And if this type of epistemology is accepted, can it be saved from a solipstic ontic position? The observer is not merely a passive receiver of the knowledge of the object before him or her. It is remarkable thing that Sankar theory of Adhyasa is one of the most consistent theories in harmony with the rest of Sankar Vedanta.

The theory of Adhyasa needs to be presented very carefully. Is it a simple a theory of Error? Has it some ontological reference also? Let it be made clear by presenting it Sankar own words:

“युष्मदस्मत्प्रत्ययगौचरयोर्विषयविषयणोस्तम :

प्रकाशवद्विरुद्धस्वभावयोरितरेतरभावानुपपत्तौ

सिद्धायांतद्वर्माणामपि सुतरामितरेतरभावानुपपत्तिः,

इत्यतोऽस्मत्प्रत्ययगोचरे विषयणि चिदात्मके

युष्मत्प्रत्यगोचरस्य विषयसतद्वर्माणां चा ध्यासः,

तद्विपर्ययेण विषयाणिस्तद्वर्माणि च

विषयेऽध्यासो मिथ्यतेभवितुं युक्तम् ”^(१)

Sankar starts his Bhasya with a strong position of his philosophy of the opposites. There is the question before Sankar Adhyasa or super imposition generally occurs in a situation when two –

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-different objects with some characteristics in common are mistakenly taken one for the other. For Example a 'Knower' can have the Adhyasa of 'snake' or the 'rope'. In this example the knowledge of snake is a mistaken knowledge which needs to be replaced by knowledge of rope at the state of true knowledge. However case of the Adhyasas in Sankar Vedanta, the situation is altogether different. The famous example of snake rope is types of Adhyasa. The main Adhyasa is central to Sankar Vedanta is the Adhyasa of 'ego' and 'non ego' or the combination of concept of the 'Asmat' and 'Yusamat' on the same 'Pratyagatama' (or natural or pure consciousness).

Here the opposition raises a meaningful question about the nature of 'ego' and 'non ego' being quite different. Now in the process of Adhyasa it is not only 'object' which mistakenly taken as otherwise by the 'subject'. Here the opposition is raising a meaningful question: The nature of 'ego' and 'non ego' is quite different. Here rather both 'subject' and 'object' are the part of adhyasa. So here in the back of 'snake' both 'subject' and 'object' are to be put. The role of 'rope' is to be played by 'pratyagatma'. Now how it is possible that subject and object which are having contradictory characteristics like light and darkness can be superimposed on the same pratyagatma ? (in fact this is question before Shankar and not his own view Dr. Radhakrishnan takes it as view of Sankar by mistake.)⁽²⁾In this question which is accepted by Sankar as a meaningful question before him. There is a important point to be noted.

In Sankar Vedanta the theory of adhyasa not only something about the role of subject and object in an epistemological process. It demands an explanation of this distinction between subject and object on the level of ontology. If Pratyagatman that consciousness which know itself purely excluding all the world of empirical phenomena is called pratyagatman. In this pure form of reality how it is possible that two totally distinct type of phenomena are to be superimposed on the same pratyagatman.

The answer to this question, as if naturally appears cannot be achieved in the frame work of epistemology. If we are not considering the nature of reality itself, it is not possible to give and answer to this question.

The answer given by Sankar and adheres further by Vacaspati is the concept of Anirvachaniyattva which must necessarily intervene. Vacaspati takes a hold stand and declares that Anirvachaniyattva is not simplify a position accepted in Sankar Vedanta, rather it is a sarvatantrasiddhant or a principal accepted by all philosophical systems.⁽⁴⁾

Anirvachaniyattva means the impossibility of any 'deduction' (Nirvachan) from ultimate reality to empirical reality.⁽⁵⁾Vacaspati examines in detail, the position of different philosophical systems that Anirvachaniyattva may be regarded as a common characteristics among all schools of thought so far as the different theories of errors are concerned.

Leaving aside the estimation of this general claim, it can be noted without doubt that Vachaspati is fully consistent when he observe the cause of the Adhyasa in partyagatma to quote he says:

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“सत्यं प्रत्यगात्मास्वयंप्रकाशत्वाद् विषयोऽनंशश्च

तथाप्यनिर्वचनीयानाद्यविद्यापरिकल्पित बुद्धि

मनः सूक्ष्मस्थूलशरीरेन्द्रियावच्छेदेनानवच्छिन्नोऽपि

वस्तुतोऽवच्छिन्न इवाभिन्नोऽपि भिन्न इवाकर्तापि

कर्तेवाभोक्तापि भोक्तेवाविषयोऽप्य स्मत्प्रत्ययविषय

इवजीवभावमापन्नोऽवभासते ।”^(६)

Vachaspati successfully derives the ontological ground for the justification of the theory of adhyasa :pratyagatma as ‘svaymprakasha’. This is term is needed veryimportant. It is a characteristic of reality in Vedanta defined as अवेधत्वसहितअपरोक्ष व्यवहारयोग्यता ⁽⁷⁾by Chitsukhacharya in his Chitsukh. This svayamprakashtva of pratyagatma makes it ontological impossible, as it is neutrally implied in its concept that it is part less and transtemporally eternal and that there can be any Real’s inposition (or super imposition) of anything it. This is the point where in the role of Anadiavidhya comes to our rescue. This partyagatma or fundamental consciousness appears in the discourse in a way that its entire role remains simply that of a one sided observer. The whole distinction between subject and object which is neutrally observed by a Sankar is to be considered in the realm of Maya.

In this way they may conclude that theory of Adyhyasa in Sankar Vedanta is a necessary ingredient of the entire metaphysical system and implication is Non Dualistic ontology.

REFERENCE:

1. Brahmasutra Shankar Bhasya 6-15.
2. RadhakrishnaS :indian Philosophy Vol – II Chapter (VII). In the Advaita Vedanta of Shankara.
3. VachapatiBhamti p 36
4. Ibid : SarvatantraSiddhanta is defined by nyaya p 33
5. VachspatiBhamti : (1-1-28)
6. Ibid : p 38
7. Citsukhi :

Effect of health on Nutrition/Dairy Foods and Human Nutrition

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Keywords: *Health, Nutrition, Food*

INTRODUCTION

Scientific progress in nutrition, medical and food sciences is having an increasing effect on our approach towards nutrition. There had been a growing awareness about the effects that nutrition has on the health of an individual. Nutritive foods play an important role as an agent for improving health, help in disease prevention and hence maintaining the well being of an individual. Researchers suggest that health of a person depends upon three chief factors; genetic factor, exercise and nutrition.

With the growing researches in food and nutrition, a new class of food known as functional foods has come into being. These functional foods are the nutritive foods that contain certain health-promoting components in addition to the traditionally occurring nutrients. Milk and other dairy products can be identified as one of these kind of functional food as it contains bioactive peptides, probiotic bacteria, antioxidants, highly absorbable calcium, conjugated linoleum acid and other biologically active components. In addition to providing nutrition to the body, these components also alleviate the health of an individual and thus help in prevention of many diseases. The following paper reviews and discusses some of the latest findings regarding the role of milk and other dairy foods in nutrition and health.

The Nutritive Value of Milk

Milk contains nine essential nutrients, making it a nutrient-rich source of food. Around eight ounce of milk serving per day provides the desired daily value for calcium, riboflavin and other key nutrients like protein, vitamin A, vitamin B12, vitamin D, potassium, phosphorous and niacin. On a food-to-food comparison, milk provides more potassium to the diet than foods with higher potassium content, such as bananas (2.4 percent) or citrus juices (3.9 percent). Overall, milk is a good source of potassium, providing 11 percent of the daily value per serving. Each 8 oz serving of milk provides about 350-400 mg of potassium. However, it is a poor source of iron. Fermentation of milk or the addition of rennet leads to precipitation of insoluble calcium casein ate curds. The milk proteins mainly consist of casein. These proteins are of a high biological value however the limiting factor of milk is that it lacks sculpture containing amino acids as compared to egg proteins. Milk contains 85% of water and hence forms a good source of fluid and nutrition to the body.

The Positive Effects of Whey

Whey, a by-product of cheese making, contains lactose, minerals, vitamins, protein, and traces of milk fat. In addition it also contains some part of SNF (solid but not fats).The traditional role of whey proteins in foods has been to provide dietary nitrogen and amino acids to the body.

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However, much attention is focused on whey proteins owing to its notable content and its form. Not only are the biological value of whey proteins superior to most other proteins, but they also have a high content of sulfur-containing amino acids like cysteine, methionine which support antioxidant functions.

Whey proteins also contain branched chain amino acids which have been established to help minimize muscle wasting under conditions of increased protein breakdown. These proteins having higher concentrations of the branched chain amino acids help to regulate muscle protein synthesis. This increases their potential use for athletes and others aiming to achieve optimal lean muscle mass. Whey components, particularly individual whey proteins, are emerging as high-value dairy ingredients with potential use in functional foods. New discoveries of the biological functions of dairy ingredients, along with advances in developing economical separation technologies for bioactive components of whey, offer excellent opportunities to function as a rich source of proteins.

The Curing Tendencies of Dairy Foods

With the formal research scientific evidences, it is confirmed that many chronic diseases such as cancer, osteoporosis, coronary heart disease and hypertension are connected to an unbalanced diet and insufficient nutrition sources. Studies have revealed that individuals consuming higher levels of dairy products, especially low-fat dairy foods, had a significantly lower risk of developing type 2 diabetes. Other research has implied that dairy foods could help prevent insulin resistance, a precursor of type 2 diabetes.

Several recent studies have also suggested that dairy consumption may help control weight and blood pressure and reduce the risks of health problems such as coronary artery disease and gout. Intake of other dairy foods such as milk, cheese, and yogurt provides essential nutrients needed for body maintenance and helps to reduce the risk of major chronic diseases. In addition, intake of milk and other milk group foods such as cheese may reduce children's risk of tooth decay. Intake of dairy foods, because of their calcium content, may help to alleviate symptoms of PMS (premenstrual syndrome) in women, and possibly protect against hearing loss in older adults.

Obesity has been identified globally as a rapidly spreading health disorder. Studies suggest that including 24 oz. of fat free or low fat milk every day as part of a reduced-calorie diet may help people lose more weight and burn more fat than cutting calories alone. Daily inclusion of yogurt or cheese in the diet can augment weight and body fat loss which occurs from reduced energy intake. In addition to its beneficial effect on hypertension and also positively affects other risk factors for heart disease, dairy foods significantly reduce blood total and low density lipoprotein (LDL) cholesterol without affecting blood triglyceride levels and to lower blood levels of homocysteine, an amino acid which are linked to increased risk of heart disease and stroke.

According to findings, dairy foods such as milk and especially cheese play a protective role in dental health. Nutrients such as protein, calcium, and phosphorus may contribute to the protective effect of these foods against dental caries milk intake does not promote dental caries and may even have a modest caries-protective effect. Under circumstances when the blood calcium level grows low, it borrows calcium from bones and these shortfall later needs to be replenished with sufficient calcium supply. In the opposite situation, when calcium supply does not reach to a level where the loss can be made good, the bones find it difficult to meet the

demand of calcium, and this result in to osteoporosis ultimately leading to weakening of bones. Dairy foods prove to be an important source of dietary calcium and it is almost imperative to consume such foods to meet the bodily requirements.

Dairy Food Intake Improves Nutrient Intake

Intake of milk and milk products (e.g., cheese, yogurt) during adolescence is important to meet calcium needs for building bone mass and strength. Milk and other dairy foods are nutrient-dense foods that supply not only calcium and vitamin D (if fortified), but also other important nutrients such as vitamin B12, riboflavin, and protein. Adequate intake of calcium and calcium-rich foods such as milk, cheese, or yogurt positively affects bone health by increasing bone acquisition during growth, and it also helps in slowing age-related bone loss. Milk, yogurt, and cheese provide a high concentration of many nutrients relative to their energy value. Dairy foods contribute only 9% of total calories available in the nation's food supply. Yet, these foods naturally provide 72% of the calcium, 32% of the phosphorus, 26% of the riboflavin, 23% of vitamin A, 20% of vitamin B12, 19% of protein, and 18% of potassium, along with appreciable amounts of other nutrients.

Milk and other dairy foods are the major contributors of dietary calcium. Without consuming dairy products, it is difficult to meet dietary calcium recommendations. Milk and other dairy foods provide 83% of the calcium in the diets of young children, 77% of the calcium in the diets of teenage girls, and between 65% and 72% of the calcium in the diets of adults.

Foods naturally containing calcium, in particular foods from the Milk, Yogurt & Cheese Group, are the preferred source of calcium not only because of their high concentration of calcium, but also because they contain other essential vitamins and minerals. The American Dietetic Association recently stated "the best sources of calcium are dairy foods, since they provide you with calcium, phosphorus, vitamin D and calories. One cup of low-fat, fruit-flavored yogurt or milk provides about 300mg of calcium"

Functional Foods

Functional foods are a newer addition to the field of nutrition sciences. They can be generally described as the foods which promote health along with providing basic nutrition. The functional component of such foods affects one or more functions of a human body. Such foods can also be naturally occurring and not always synthetic. The fermented products of milk form such a part of functional foods which contain probiotic bacteria. Such probiotic bacteria have a considerable impact on one's physiological development as well as it also alleviates the intestinal health of an individual. In addition, evidence of health benefits associated with the presence of specific components or bacteria is progressively gaining established scientific credibility. It is therefore understandable that among the best known examples of functional foods are fermented milks and yogurts containing probiotic bacteria.

The Probiotic Dairy Products

In the year 1908, the Nobel Prize winning Russian scientist, Elie Metchnikoff, linked the long, healthy life of Bulgarian peasants to their high intake of fermented milk products containing lactic acid producing microorganisms. He theorized that the lactic acid bacteria in fermented milk displace undesirable bacteria normally present in the intestine, resulting in a healthier life.

However it needs to be noted that different strains, species, and genera of bacteria may have unique effects.

The probiotics are such healthy and friendly microorganisms which promote the health of an individual when consumed in a substantial quantity. The majority of probiotics are lactic acid bacteria, especially lactobacilli and bifid bacteria. These probiotic bacteria are almost exclusively found in dairy foods like yoghurt, cultured milk drinks, Sweet Acidophilus, kefir, and some cottage cheese and ice creams. Probiotics also help in regulating the severity of acute diarrhea. It also reduces the chances of colon cancer and also helps strengthen the immune system. The dairy foods, which are a natural vehicle for the probiotics to the intestine, are a desirable source of probiotics. Probiotics such as lactobacilli and bifid bacteria stimulate certain cellular and antibody functions of the immune system, which in turn may increase resistance to immune-related diseases

Summary

Milk and other dairy foods have been recognized as important foods since 4000 B.C. On account of dairy foods' natural combination of essential nutrients, these foods have continued to be a key component of diet. On the basis of the evidences presented by the researches, the belief has been established that the inclusion of dairy foods in diet has a powerful influence on health and wellbeing. The food industry has effectively taken this into consideration and additional food items such as flavored yoghurt and low fat and low calorie milk have been introduced to cover this shortfall of nutrition. The use of probiotics, prebiotics, synbiotics and functional food has been popularized as food products with special characteristics, which alleviate the health.

Because of their unique combination of nutrients, dairy foods cannot be duplicated by a fortified food or dietary supplement. To meet the basic needs of proteins, vitamins and minerals, it becomes imperative to make the dairy foods an important part of one's diet. Milk and other dairy foods contribute to recommended nutrient intakes and promote health throughout life, from infancy through older adult years. Hence, Small dietary changes, such as increasing dairy food intake, can improve the nutritional quality of the diet and play a beneficial role in health promotion and disease prevention. On account of such benefits, the potential use of dairy ingredients in a variety of food products to enhance health has captured the attention of food scientists.

REFERENCE:

1. Lawson¹, Ruth. Moss, Angela. Givens, Ian. 2001., The role of dairy products in supplying conjugated linoleic acid to man's diet: a review, Nutrition Research Reviews, 14 (3)
2. Lois D. McBean, M.S., R.D., 2001. Health enhancing Properties of Dairy Ingredients., The dairy council digest. 72 (2)
3. Lois D. McBean, M.S., R.D., 2003. Healthy Snacking For Healthy Kids., The dairy council digest. 74 (4)

Effect of health on Nutrition/Dairy Foods and Human Nutrition

4. Lois D. McBean, M.S., R.D., 2004. Dairy Foods' Contribution to Nutrient Dense Diets., The dairy council digests. 75 (1)
5. Lois D. McBean, M.S., R.D., 2004. The Benefits of Dairy Foods In Health Promotion., The dairy council digest. 75 (3)
6. Lois D. McBean, M.S., R.D., 2005, Probiotics: considerations for human health. The dairy council digest. 76 (1)
7. Lois D. McBean, M.S., R.D., 2005. Probiotics: Considerations For Human Health., The dairy council digest. 76 (1)
8. Lois D. McBean, M.S., R.D., 2005. The New Food Guidance System., The dairy council digest. 76 (4)
9. Miller, Gregory D. 1999, The Role of Calcium In Prevention of Chronic Diseases, national dairy council, north Carolina
10. Sanders, M. E. (1998) Overview of functional foods: emphasis on probiotic bacteria. Int. Dairy J. 8: 341–347.

A Comparative Study on Dimensions of Role Efficacy between Middle and Lower Management of Universities in Rajasthan

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ABSTRACT

The performance of a person working in an organization depends on his own potential effectiveness, technical competence, managerial experience as well as the design of the role that he performs in the organization is called role efficacy. The purpose of the present research work is to compare role efficacy of middle and lower management employee's universities of Rajasthan. Respondents were directly contacted for filling up the standard questionnaire of Role Efficacy Scale, developed by Dr. Uday Pareek. The ten dimensions of role efficacy namely (Centrality, Self-role integration, Proactivity, Creativity, Inter-role linkage, Helping relationship, Super ordination, Influence, Personal growth and Coordination) were analyzed through t-test. The results conclude that there is significant difference on dimensions inter role linkage, helping relationship and coordination of role efficacy of middle and lower management. The significance of the study is based on the challenges facing higher education and to improve their academic standard through role efficacy of middle and lower level management.

Keywords: *Role efficacy, Middle management, Lower management*

INTRODUCTION

The performance of a person working in an organization depends on his own potential effectiveness, technical competence, managerial experience as well as the design of the role that he performs in the organization is called role efficacy. The word "university" is derived from the Latin universities magistrorum ET scholarium, which roughly means "community of teachers and scholars." The university's employees played different roles in the university to execute various tasks. They have required proficiency to execute various tasks so we have to needed study of role efficacy of employees of universities. Role efficacy mean's a person's capacity for producing a desired result or effect; effectiveness. *In other words* it means potential effectiveness of an individual occupying a particular role in university.

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REVIEW OF LITERATURE

Mahadevi. S. Waddar & Vijaylaxmi A. Aminabhavi (2012) conducted research on topic “Role Based Performance and Role Efficacy of Aircraft Employees In Relation To Their Emotional Labour: A Study For Developing Employability Skill” Most discussion concerning today’s work force eventually turn to employability skills. Finding workers who have employability or job readiness skills that help them fit into and remain in the work environment is a real problem. Employers need reliable, responsible skills and attitude to work together with other workers, especially in service interactions the management of service employee’s emotion through emotional labour. The technique of correlation coefficient resulted in findings that all the two dependent variables namely role based performance and role efficacy are found to be significantly related with emotional labour. Finally, the interpreted results suggests the organizational development practitioner to plan and execute the intervention programs to enhance the emotional labour of the aircraft employees naturally without suppressing their emotions to make them to have better role based performance and role efficacy.

OBJECTIVES OF THE STUDY:

The objectives of the present research are as follows:

1. To study the role efficacy in the Middle and Lower Management employees of universities of Rajasthan.
2. To study the various dimensions of role efficacy namely Centrality, Self-role integration, Proactively, Creativity, Inter-role linkage, Helping relationship, Super ordination, Influence, Personal growth and Coordination of university employees.
3. To compare the various dimensions of role efficacy between Middle and Lower Management employees of universities.

Methodology:

First of all the head of the institutions were contacted and after taking permission for data collection, respondents were contacted at their comfort zone of time. Then the Role Efficacy Scale questionnaires were distributed and collected after 45 minutes. Thereafter scoring was done with the help of manual and interpretation was done. Thereafter t-test was applied for the comparison of middle and lower management university employees in the context of various dimensions of role efficacy.

Tool:

RES (Role Efficacy Scale) by Udai Pareek was used. The scale consists of 10 dimensions of role efficacy namely Centrality, Self-role integration, Proactively, Creativity, Inter-role linkage, Helping relationship, Superordination, Influence, Personal growth and Coordination. The test is reliable (reliable coefficient 0.68) and valid (validity coefficient 0.51)

Research Design

Data were collected from 180 employees drawn from Public, Private and Deemed Universities. For testing the differences on present role efficacy between Middle and Lower Universities, the distribution of sample is as follows: Middle management =90 and Lower management = 90.

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Sample:

The sample consisted of a total number of 90 employee's middle management and 90 employees lower management from six universities of Rajasthan.

ANALYSIS AND DATA INTERPRETATION

There will be no significant difference among Middle and Lower Management regarding dimensions of role efficacy namely Centrality, Self-role integration, Proactivity, Creativity, Inter-role linkage, Helping relationship, Super ordination, Influence, Personal growth and Coordination of University's employee.

Comparison of Middle and Lower Management on dimensions of Role efficacy

Dimensions	Type of Management	N	Mean	S.D.	Mean Diff	T	p value
Centrality	Middle	90	1.99	.954	.011	.072	.943
	Lower	90	1.98	1.122			
Self-role integration	Middle	90	2.58	1.263	.411	1.604	.111
	Lower	90	2.17	2.079			
Proactivity	Middle	90	1.86	1.303	.333	1.535	.126
	Lower	90	1.52	1.595			
Creativity	Middle	90	2.59	1.101	.333	1.517	.131
	Lower	90	2.26	1.771			
Inter-role linkage	Middle	90	2.42	1.236	.544	2.063	.041
	Lower	90	1.88	2.177			
Helping relationship	Middle	90	2.30	1.659	.667	2.102	.037
	Lower	90	1.63	2.510			
Superordination	Middle	90	1.41	1.405	.244	1.013	.312
	Lower	90	1.17	1.807			
Influence	Middle	90	1.93	1.339	.189	.840	.402
	Lower	90	1.74	1.660			
Personal Growth	Middle	90	2.13	1.144	.211	1.072	.285
	Lower	90	1.92	1.478			
Coordination	Middle	90	3.18	1.232	.011	2.312	.022
	Lower	90	2.62	1.917			

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The above table shows that 't' score for centrality dimension of role efficacy is found to be 0.072 which is insignificant at 0.05 level it infers that there is no significant difference on centrality dimension of role efficacy between middle and lower management. The above table indicates that 't' score for self-role integration dimension of role efficacy is found to be 1.604 which is insignificant at 0.05 level it infers that there is no significant difference on self-role integration dimension of role efficacy between middle and lower management. The above table reflects that 't' score for proactivity dimension of role efficacy is found to be 1.535 which is insignificant at 0.05 level it infers that there is no significant difference on proactivity dimension of role efficacy between middle and lower management. The above table depicts that 't' score for creativity dimension of role efficacy is found to be 1.517 which is insignificant at 0.05 level it infers that there is no significant difference on creativity dimension of role efficacy between middle and lower management. The above table reveals that 't' score for inter-role linkage dimension of role efficacy is found to be 2.063 which is significant at 0.05 level it infers that there is significant differences on inter-role linkage dimension of role efficacy between middle and lower management. The above table observes that 't' score for helping relationship dimension of role efficacy is found to be 2.102 which is significant at 0.05 level it infers that there is significant differences on helping relationship dimension of role efficacy between middle and lower management. The above table refers that 't' score for super ordination dimension of role efficacy is found to be 1.013 which is insignificant at 0.05 level it infers that there is no significant difference on super ordination dimension of role efficacy between middle and lower management. The above table exhibits that 't' score for influence dimension of role efficacy is found to be 0.540 which is insignificant at 0.05 level it infers that there is no significant difference on influence dimension of role efficacy between middle and lower management. The above table refers that 't' score for personal growth dimension of role efficacy is found to be 1.072 which is insignificant at 0.05 level it infers that there is no significant difference on personal growth dimension of role efficacy between middle and lower management. The above table exhibits that 't' score for coordination dimension of role efficacy is found to be 2.312 which is significant at 0.05 level it infers that there is significant differences on coordination dimension of role efficacy between middle and lower management.

INTERPRETATION

- **Centrality dimension of Role Efficacy** Middle and Lower management do not differs significantly on Centrality dimension of organizational role efficacy. It may be due to both types of management have similar level of potential effectiveness.
- **Self Role Integration dimension of Role Efficacy** Middle and Lower management do not differs significantly on Self Role Integration dimension of organizational role efficacy. Middle and Lower management have similar level of Self Role Integration. It may be due to both types of management executes similar nature of work and role at university level.
- **Proactivity dimension of Role Efficacy** Middle and Lower management do not differs significantly on Proactivity dimension of organizational role efficacy. It may be due to both

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type of management executes all work according to issued orders by top management at university levels.

- **Creativity dimension of Role Efficacy** Middle and Lower management do not differ significantly on Creativity dimension of organizational role efficacy. Middle and Lower management having similar level of opportunity to be creative it may be due to perform routine task as per orders of Top management at university level.
- **Inter Role Linkage dimension of Role Efficacy** Middle and Lower management differs significantly on Inter Role Linkage dimension of organizational role efficacy. Middle management having more Inter Role Linkage in comparison to Lower management it may be due to Middle management executes mediator work between Top management and Lower management.
- **Helping Relationship dimension of Role Efficacy** Middle and Lower management differs significantly on Helping Relationship dimension of organizational role efficacy. Middle management had significantly more Helping Relationship from Lower management it may be due to Middle management executes all work with help to each other then Lower management.
- **Super ordination dimension of Role Efficacy** Middle and Lower management do not differ significantly on Super ordination dimension of organizational role efficacy at university level. It may be due to they have serve at similar level of systems, groups and entities beyond the organization.
- **Influence dimension of Role Efficacy** Middle and Lower management do not differ significantly on Influence dimension of organizational role efficacy. It may be due to they have similar power to Influence larger section of society.
- **Personal Growth dimension of Role Efficacy** Middle and Lower management do not differ significantly on Personal Growth dimension of organizational role efficacy. It may be due to Middle and Lower management employees have similar opportunities for personal growth.
- **Coordination dimension of Role Efficacy** Middle and Lower management differ significantly on Coordination dimension of organizational role efficacy. Middle management had significantly more Coordination from Lower management employees it may be due to Middle management are super position holders to listen the employee's problem and solve them then lower management employees.

FINDINGS

The Middle management performs better on Inter-role linkage, helping relationship, Coordination in comparison of Lower management. It was found that there is significant difference in dimension of role efficacy between middle and lower management.

CONCLUSIONS

There is significant difference between Middle and Lower management on dimensions Inter-role linkage, Helping Relationship and Coordination.

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RECOMMENDATIONS

1. Lower management required all three subsystems such as inter-role linkage, helping relationship and coordination.
2. The Role Efficacy refresher program for middle level management should be organized, so that employee can perform better. A separate program for lower management is the dire need of the time.
3. Lower management required to improve Inter-role linkage, Helping Relationship and Coordination dimensions of role efficacy through orientation programs.

LIMITATION OF THE STUDY:

This research is limited to the middle and lower management of educational sector of Rajasthan. This study relied on self report and surveyed data.

REFERENCE

1. Waddar S. M. & Aminabhavi V. A. (2012) conducted research on topic “Role Based Performance And Role Efficacy Of Aircraft Employees In Relation To Their Emotional Labour: A Study For Developing Employability Skill” I.J.E.M.S., VOL.3(1) 2012: 24-28
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Relationship between Parenting style and self concept of adolescents

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ABSTRACT

The present study analyzed relationship between the Parenting Style and self concept of 400 VIII and X Standard students from Pachora in Maharashtra state (India). Bharadwaj et al's Parenting scale and Dr. Mrs. G. P. Sherry et al's self-concept scale is used. Majority of the adolescents have developed acceptance Parenting style on the models of Parenting. It is found that an average self-concept of adolescents is 56 percent.

Keywords: *Parenting style, self-concept.*

INTRODUCTION

Family is considered as the smallest social unit and the main element of each society. Family environment is the first and most important factor that influences the individual's growth (Bahrami, 2008). The foundation of development of individual lies in the womb of the family. The growth of child's personality depends upon the family atmosphere. Through family, he learns the norms of society, interrelationships and become a competent and useful member of society. Parents are supposed to create a most congenial, happy, democratic, lucid and warm atmosphere through their parenting style and through this child develops his hidden potentialities and social interaction skill. (Bharadwaj, 1995).

If the children can't enjoy a good relationship with significant adults in their life, they will be negatively affected especially in their self shaping process. There are three ways children can be affected by the emotion that is being shown by their parents. First is when rejection happens. Second is when the parents become overprotected and third is when emotional confusion occurs as the result of the parents keep showing negative and positive emotions towards them one after another (Barret & Trent, 1991).

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Generally in India both father and mother pay attention to the development of child but mother's role is more important especially middle class parents are more callous about their child's overall growth. Parents give more attention to their educational career. Nowadays, parenting style certainly is an interesting and important topic (Caporella, 2007). Aim of this present study is to increase better understanding about different parenting approaches bring different effectiveness in development especially self-concept among High school students.

1.1 Parenting Style:

Parenting is a complex activity that includes many specific behaviors that work individually and together to influence children out comes. The two distinctive roles of parent include both mothering and fathering. Loving, caring, authoritative fathering develop the child independent, emotionally stable and create his attitude positive towards the society. If mother's expectation is realistic, loving, caring less punishing and dominance the development of child is more productive and imaginative but utopian expectation of mother, over protection, more disciplined mother's behavior seen to be responsible for the problem of modes of parenting.

1.2. Self - concept:

Adolescent's self-concept is built on limited experiences and it is hard for him to relate himself to change social world. Self-concept is formed through experiences with the environment and is influenced especially by home environment reinforcements and significant others. (Shavelson et al, 1982)

The self has been defined as that part of one's personality of which one is aware. Self-concept is "the set of perceptions or reference points that the subject has about himself; the set of characteristics, attributes, qualities and deficiencies, capacities and limits, values and relationships that the subject knows to be descriptive of himself and which he perceives as data concerning his identity" (Hamachek, 1981; Machargo, 1991).

REVIEW OF LITERATURE:

Marfatia (1973) found that lack of parental love, over strictness or over disciplined, attitude especially that of father, constant quarrel between the parents, alcoholic parents, low family income, loneliness and lack of recreational outlet are some of the causes responsible for maladjustment among the adolescents in various areas home, emotional and school. Block (1985) found that child who experiences the psychological pain of parental rejection tends to manifest signs of maladjustment. Kurdek et al. (1994) found that adolescents raised in authoritative families are more socially competent, more self reliant and have a better work ethic. They also show power sign of psychological distress, such as anxiety or depression and fewer adjustment problems.

METHODOLOGY

Aim of the Study:

The study intends to measure the parenting style and self-concept of secondary school students and to find out the status and importance of parenting style in development of their self-concept.

Hypotheses:

In the present research work, following hypotheses are formulated,

1. Status of perceived parenting style among the adolescents.
2. Status of perceived self-concept among the adolescents.
3. There is significant relationship between each model of parenting and self- concept.
4. Contribution of parenting style in the development of self-concept.

Sample:

The study was conducted in Pachora, Jalgaon District of Maharashtra. Six Schools are selected randomly and 400 students have been enrolled from VIII to Xth standard in the sample.

Tools:

The following tools are used in the study.

1. Parenting scale:

Parenting scale developed and standardized by Bharadwaj, Sharma and Garg (1998) consists of eight models of parenting, with mothering, fathering and parenting status.

1) Rejection vs. Acceptance (R vs A), **2)** Carelessness vs. Protection(C vs P), **3)** Neglect vs. Indulgence(N vs I), **4)** Utopian expectation vs. Realism(U vs R), **5)** Lenient standard vs. Moralism (L vs M), **6)** Freedom vs. Discipline(F vs D), **7)** Faulty role Expectation vs. Realistic role Expectation (F vs R), **8)** Marital conflict vs. Marital adjustment.(M vs M).

2. Swatva Bodh Parikshan (SBP):

This scale is constructed and standardized by Dr. Mrs. G. P. Sherry, Dr. R. P. Varma and Dr. P. K. Goswami. This scale consists of 48 items and 08 dimensions of self concepts.

RESULTS AND DISCUSSION:

The results and discussion of present study is as follows:

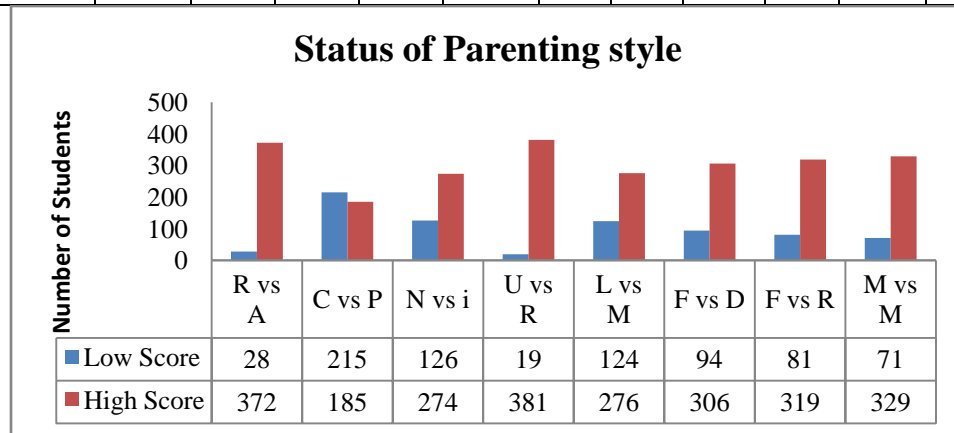
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4.1 Status of each of the perceived model of parenting among the Adolescents:

To identify the status of perceived model of parenting among adolescents they are classified on the sten score. The sten scores range from 1-10. The sten score 1-5 indicates lower score and 6-10 indicates higher score, the lower score means undesirable and negative dimension and higher score means desirable and positive dimension of the model of parenting.

Table I: Status of each of the perceived model of parenting among the Adolescents.

Model of parenting	R vs A		C vs P		N vs I		U vs R		L vs M		F vs D		F vs R		M vs M	
	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High	Low	High
Total Student (400)	28	372	215	185	126	274	19	381	124	276	94	306	81	319	71	329
Percentage	0.7	93	53.75	46.25	31.5	68.5	4.75	95.25	31	69	23.5	76.5	20.25	79.75	17.75	82.25



Parenting style

The results of the table I indicates that under Rejection Vs. Acceptance model of parenting 93 percent adolescents have perceived their parents have expressed acceptance in their interpersonal relationship. In second model i.e. Carelessness vs. Protection 46.25 percent adolescents has perceived carelessness that their parents do not pay adequate heed towards their activities that gives them an impression of unwantedness. On the third model Neglect Vs Indulgence 68.50 percent adolescents have perceived that parents give attention to their demands. But over indulgence of parents with the child develops certain whims and psychological inconsistencies in the latter. However, it should be kept open to us that indulgence with the child to a reasonable degree is a health giving sign and it also health developing child's self-concept. On the fourth model, Utopian expectation Vs Realistic expectation 95.2 percent adolescents have perceived that their parents expect realistic expectation from them. These realistic views of parental attitude know the child's capabilities and outside world also. Therefore, they never expect very high unrealistic and imaging demands from their children. On the fifth model, Lenient standard Vs Moralism 69 percent adolescents have perceived their parental moralism. It would be an

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admirable exercise, if a child prone to inculcate a reasonable degree of moralism in his personality orientations.

On the sixth model, Freedom Vs Discipline 76.5 percent adolescents have perceived parental discipline in their interpersonal relationship. Of course, the discipline is strong need of social orientations but severe discipline is on part hamper the delight and liberty of the child which he wishes to obtain at every stage of life. The result of table I indicates that under Faulty role expectation Vs Realistic role expectation model of parenting 79.75 percent respondents perceived for the realistic role of expectation, from their parents. The children know for certain that their parents are alike and what is expected to them. The last model Marital conflict Vs Marital adjustment 82.25 percent adolescents perceived that their parents' marital adjustment is good. Marital adjustment exhibits itself in a calm and composed adjustment between the parents thereby creating a solidarity and congenial atmosphere of peace and harmony in the family.

4.2 Status of self-concept among the Adolescents. -The status of the adolescents on self- concept is identified on the basis of the manual.

Row Score	20and less	21-26	27-38	39-44	45and above
Category	Very poor self-concept	poor self-concept	Average self-concept	Good self-concept	Very Good self-concept

The total score on the scale indicates the self-concept, whereas the greater the total score on the scale is expressed in terms of average self-concept.

Table II Status on the self -concept among the Adolescents.

	Very poor self-concept	Poor self-concept	Average Self-concept	Good Self-concept	Very Good Self-concept
No. of Students-400	03	33	224	123	17
Percentage	0.75	8.25	56	30.75	4.25

The nature of self-concept is such that it is possible to enhance the overall success in one's life. Results indicate that 56 percent adolescents have Average self-concept, 30.75 Good self-concept, 8.25 percents Poor self-concept, 4.25 Very Good self-concept and 0.75 Very Poor self-concept. These results are concluded that the majority of the adolescents have developed average status of self-concept. It means that very few adolescents have developed lower level of status on Poor self-concept. Very few adolescents have developed lower level of status on Very Good self-concept. Therefore, the second hypothesis that the majority of the adolescents have developed the statuses of self-concept is average.

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4.3 Relationship between the each perceived model of parenting and self-concept.

The result of the table III critically reveals that the coefficient of correlation between self-concept and all model of parenting style.

III Relationship between each perceived model of parenting style and self-concept.

SBP and Parenting style Correlations										
		SBP	R vs A	C vs P	N vs I	U vs R	L vs M	F vs D	F vs R	M vs M
SBP	Pearson Correlation	1	.179**	-.020	-.007	.229**	.322**	.175**	.305**	.143**
	Sig. (2tailed)		.000	.692	.887	.000	.000	.000	.000	.004
	N	400	400	400	400	400	400	400	400	400

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

The results from the table III exhibits that there exist significant correlations at both 0.1 and 0.5 significant levels, of self-concept and eight model of parenting style of the sample. The significant correlations between Rejection Vs Acceptance parenting style, Utopian Expectation Vs Realism parenting style, Lenient Standard Vs Moralism parenting style, Freedom Vs Discipline parenting style, Faulty role expectation Vs Realistic role expectation parenting style, Marital conflict Vs Marital Adjustment parenting style and self-concept.

Table IV Step wise regression Analysis model of parenting on self concept.

4.4 Coefficient of SBP and Parenting Style

Model of parenting	R vs A	C vs P	N vs I	U vs R	L vs M	F vs D	F vs R	M vs M
Beta	.102	-.127	-.217	.194	.270	.062	.223	.041

a. Dependent Variable: SBP

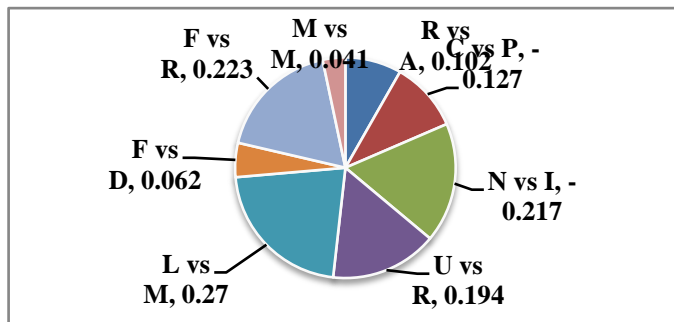


Table IV and graph reveals the step wise regression of the models of parenting on self-concept. The results indicates that Neglect Vs Indulgence (N vs I), Lenient Standard Vs Moralism (L vs M), Faulty

role expectation Vs Realistic role expectation (F vs R), models of parenting contributes more for the development of self-concept.

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From the above results, it is concluded that children with low parenting have unsatisfactory self-concept than children with high parenting style. Innovative programs on parenting may be planned to improve parent-child relationship during adolescence and help for better self-concept in adolescent age.

REFERENCES:

1. Bharadwaj, R.L., Sharma, H. and Garg, A(1998) A Manual of Parenting scale. Agra, Pankaj Mapan. Print.
2. Brian .C.C – How to use SPSS, 2nd Ed.
3. Erikson, E.U.(1963) parents who cares more or less. *journal of parents and children*. Summer vol. XII No2. Print.
4. In J. Barooah, S. & Phukan, M. (1999). A comparative study of self-concept of orphan. Print.
5. Kothari C.R. (2004): Research Methodology, New Age International Publisher.
6. Mangal .S.K. – Statistics in psychology and education, 2nd Ed.
7. Marsh, H. W. (1993). Academic self-concept: Theory measurement and research. Print.
8. Minium, E. King, B.; Bear, G.(2008) Statistical Reasoning in psychology and Education, 3rd Edi. Published by John Wiley & Sons Inc. Print.
9. Tiwari, Savita & Bansal, Indu.(1994). A study of self-concept of high and low achieving adolescent girls. *Indian Psychological Review*, 43, 21-25. Print

Assessing the Role of Coping Styles as Mediators for Hope and Optimism in Measuring Academic Motivation among First Generation Learners

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ABSTRACT

The present study was conducted to examine the impact of positive psychological strengths hope and optimism on academic motivation. To study the role of proactive coping, avoidance coping and emotion coping as a mediator of hope and optimism with academic motivation of students. College students participated. Significant positive relations found for hope and optimism. Regression analysis showed proactive coping significantly mediated the relations of hope and optimism with academic motivation.

Keywords: *optimism, hope, coping and academic motivation.*

INTRODUCTION

In today's world education is indispensable for human progress and empowerment. Educators and psychologists play a major role to impart knowledge and enhance skills among first generation learners. The current education system raises expectations from students and the concern to perform better from peers is ever increasing. This has led to an interested aspect in educational psychology. Psychologists perceive motivation is one of the important key concepts to explain different levels of performance among students. It has been observed that factors such as such as optimism, hope, proactive coping and academic motivation are related to academic success among students. Previous research in this area of concentration has revealed that students who are hopeful and optimistic do better than counterparts.

MOTIVATION

The present paper puts forth academic motivation among students in light. Motivation is the process where goal directed activity is persuaded and maintained. It is the force that energizes and directs behaviour towards the goal (Eymur & Gehan, 2011). In the current result driven educational system, it is one of the most important concepts in education psychology (Eggen & Kanchak, 1994). There are three main types of motivation which are discussed as under (Deci & Ryan, 1985).

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Intrinsic motivation arises from a desire to learn due to desire of self fulfillment, enjoyment and achieve success in particular area. Intrinsic motivation is an internal behavioral aspect that forms an inherent part of a person's character. Intrinsic motivation in an individual depicts inherent satisfaction (Ryan & Deci, 2000; Vallerand & Ratelle, 2002).

Extrinsic Motivation refers to a result oriented and task driven motivation in order to be successful. Their behaviour is enhanced by external elements including rewards and punishments. Research show that extrinsic motivation is about achieving success in order to ward off any punishments. Educational psychologists believe that grade-oriented students are extrinsically motivated, whereas students who are genuinely interested in gaining knowledge are intrinsically motivated.

A motivation is depiction of belief that one's behaviour is the result of something out of conscious (Cokley 2000). It is the absence of any self determination (Deci & Ryan, 1985). An example of an amotive student cannot explain the reason why he goes to college.

Evidences suggest that students who are highly motivated are more likely to have increased level of academic achievement and have lower dropout rates (Blank, 1997). Other studies revealed positive relationships between motivation and academic performance and success (Gottfield, 1990; Grolnick, Ryan & Deci 1991; Wong & Csikszentmihalyi, 1991; Ames, 1992; Mitchell, 1992; Schiefele, Krapp & Winteler, 1992; Fortier, Vallerand, Guay, 1995; Pintrich & Maehr, 1995; Johnson, 1996; Green, Nelson, Martin, Marsh, 2001; McInerney, 2001; Sandra, 2002; Eymur & Geban, 2011).

The autonomy theory based on academic motivation by Deci and Schwartz describes the relationship between academic motivation and performance; based on grades received by the students and differentiated by gender. Research showed that gender is not a significant predictor for academic motivation (Jegede, 1994). Empirical evidence found that the average level of academic motivation decreased with increasing age (Hefer & Stuart, 1998). Previous research on academic motivation among students has focused on gender, age, and psychological impact on individuals. Empirical evidence on hope and optimism playing a role in academic motivation among students leading to better academic performance has been scanty.

HOPE

Psychologists laid emphasis on identifying psychological strengths that foster healthy development of human beings. One major tenet of positive psychology requires expertise and expanded view in assessment of traits and strengths, to stressful life events and life style factors (Master & Coastsworth, 1998; Rutter 1994). Hope has received maximum attention with children and adolescents (Synder, Lopez & Shorey, 2003). Numerous studies have depicted the importance of motivational factors in adolescent's academic and behavioral development

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(Anderson & Maehr 1994; Stipek 2002). Research on academic motivation have constantly depicted that students who believed that good grades are caused by internal and external causes (Weiner, 2000) and accepted their need and behavioral response (Bandura, 1997) attained higher levels of academic success. Research has also confirmed that school age students who have highly hopeful have better social interactions, self-esteem, optimism and academic achievement (Synder, Heavens et al. (1997), Snyder, Hoza et al. (1997).

Hope appears to be the key motivational construct in development of a positive psychology among students. The goal setting theory of hope depicts that hope exists when an individual has motivation to remain engaged with a future outcome and assume a way to reach a particular outcome. Therefore, goal setting theory focuses on hope as a cognitive set rather than emotion. The emotions that are associated with hope are seen as resulting from a goal-directed thought, with positive emotions reflecting perceived success in the pursuit of goals and negative emotions reflecting perceived failures (Synder et al; 1991, 2000).

Averill et al. (1990) established four rules of hope based on future appraisals. Firstly, hope is achieved when one evaluates the probability of acquisition of being realistic. Secondly, individuals hope only for what they appraise is personally or socially acceptable. Thirdly, only outcomes and events that are appraised as important are hoped for (priority rule). Fourthly, people who hope should willingly take appropriate action to achieve their goals if actions are possible.

Averill et al. (1990) revealed that majority of participants in his study described hoping for success in achievement related contexts and interpersonal relationships; also for wellbeing of others. Roseman, Spindel and Jose (1990) investigated hope as part of comprehensive appraisal theory of emotion and found that hope was more of positive emotion as situation was congruent with ones emotion. Moreover, participants rated their likelihood of hope outcomes as lower than those elicited joy, affection and pride.

OPTIMISM

Optimism is defined as a generalized expectancy that good as opposed to bad outcomes will generally occur when confronted with problems in life situations or circumstances. In general optimism denotes a positive attitude being part of positive psychology. It has been seen that some people are optimistic by nature and are more positive about life but it can also be adapted with right type of experiences. According to Seligman (1991), optimism can be enriched by selecting achievable goals. Optimism plays a role of positive mood, perseverance, good problem solver, academic and workplace success (Scheier et al 1992). Individuals are continuously engaged in efforts to overcome obstacles to their goals as long as further relates to success (Scheier et al 1992). Research shows that college students who are more optimistic are better academic performers (Medlin U& Green 2009). There has been a contrary view as well on this,

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where Rand found no significant relationship between optimism and grade expectancy. The trait of optimism leads to cognitive, coping, contextual resources enhancing mental health. Optimism helps us face the difficulties and reach the target and achieve the goals. Optimistic people are consistent and courageous towards goals in life (Scheier&Carver 1992) and are more suited to cope with stress. The trait of optimism leads to cognitive, coping, contextual resources enhancing academic motivation of students.

Student's coping strategies play a dominant role in the academic motivation; leaving a strong impact on approaches help them in planning and staying motivated in academic career.

When preparing for academic success, students using a problem focused coping strategies adopt strategic approaches to motivate them in their academic life, resulting in more positive affects. Moreover, avoidance coping tends to adopt a surface approach to studying (Appelhans & Schmeck, 2002; Moneta, et al; 2007). Further outcome, determined student coping styles to enhance academic motivation is a major stake for research in educational psychology.

COPING

Researches in this area have generally discussed dimensions of coping mostly in pairs. For example, primary versus secondary control (Rothbaum, Weisz, &Synder, 1982), mastery versus meaning (Taylor,1983), problem focused versus emotion focused coping (Lazarus, 1991), and assimilated versus accommodative coping (Brandstadler,1992). The primary-secondary control and mastery meaning strategies are earthy in nature. For example, when students first try to alter the demands that are at stake and plight find subjective meaning to it.(Schwarzer&Taubert, 2002).

Lazarus (1991) defined two types of coping as problem focused and emotion focused coping. Problem focused coping helps to pacify stressful events, though considering emotion focused coping efforts to govern the emotional consequences of stressful events. Emotional focused coping including emotional social support is positively associated with growth (Marker & Langer 2001). Moreover, coping has been considered as a follow up behavioral dimension after the occurrence of stressful events. Recently psychologist have started emphasize more on proactive coping (Greenglass,Schwarzer,Jakubiec, Fiksenbaum,Taubert,1999).

PROACTIVE COPING

Previous researchers viewed coping as an adaptive reaction to stressful experiences, termed as reactive, a technique to be used once stress has been felt. It is a process developed in the context of a situation appraised as personally significant and exceeding one's resources for coping (Lazarus &Folkman 1984). It is initiated if an individual's goal is threatened or lost. Moreover, psychologist assessed coping mainly in terms of their effectiveness in regulating distress. In the present scenario, coping mainly is seen as having multiple positive functions, to cope before stress sets in.

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A new development in coping research focuses on proactive coping. Proactive coping relates that some individuals tend to live their lives in a way that they could collect assets and fight for unexpected obstacles. Proactive coping is still to be explored and studied in its details; we need to explore coping styles such as venting and suppression (Carver, Scheier & Weintraub, 1989). Proactive coping is a forward looking strategy, integrating processes of person quality of life management of those of self regulatory goal attainment (Greenglass, Schwarzer & Taubert, 1999). Proactive coping is more future oriented and helps in goal management. The motivation for proactive is more positive, it results in perceiving situations as challenging, positive contributions to individual's behaviour and cognitive coping (Greenglass, 1993).

The proactive coping perspective may best be described by Zea & Tyler (1996) as a general step or orientation that pervades the way an individual approaches life activities, facilitating positive outcomes (p.331). To help individuals reduce or modify stressful events in life, proactive coping can improve one's quality of life. The skills which enhance this behaviour include planning, goal setting, organization and mental stimulation (Aspinwall & Taylor).

EMOTIONAL SUPPORT SEEKING

Emotional support refers to students general perception in a particular situation or circumstance, when a student works on a difficult assignment or worry about lack of social connectedness in his life. Review of literature in this regard reveal that emotional support as a construct has been measured as student's general perception of the teacher as warm and friendly (De Wit, Karoja, Ryef Shain 2011; Wentzel et al; 2010).

Student's perception of emotional support is related to their feelings of relatedness or connectedness (Marchand & Skinner, 2007). Furthermore, these validate how they feel when they are with their mentors. Previous research has revealed that positive perception of teachers as emotionally supportive is associated with positive educational outcomes among students. It was noted that students who feel emotionally supported are more likely to work harder towards their goals (Goodenow & Grady 1993; Wentzel, 1994); ask for support and use self regulated learning strategies (Newman & Schwager, 1993; Ryan & Patinet 2001). An interesting question was whether the relations between hope and optimism effect measures of academic motivation; at least partially mediated by emotional support seeking.

AVOIDANCE COPING

Avoidance coping is defined as an attempt to escape from a problem and deal indirectly with it (Roth & Cohen, 1986). Previous research depicted avoidance coping is linked to variety of demographic (e.g; age; Folkman et al; 1987), interpersonal (e.g; lack of social support; Manne et al; 2005), and problem specific (e.g uncontrollable stressors; Rayburn et al; 2005) factors.

COPING & OPTIMISM

Research has suggested the importance of optimism as an important regulator in how people cope with stressful events. Optimists are considered proactive copers who evaluate difficulties in a positive way, view tough times as challenges instead of threats. Hence, proactive coping tendencies predict psychological wellbeing over and above the effects of being optimistic. People who are resistant to coping work harder in stressful circumstances. Previous research in this area of concentration further revealed that optimism was positively associated with two subsets of engagement coping responses: 1) problem focused and 2) emotional focused. Optimists were responsible for stressors confronted; they further controlled stressors with problem focused coping approach. Optimists are flexible to change and adapt to new situations and circumstances.

HOPE & OPTIMISM

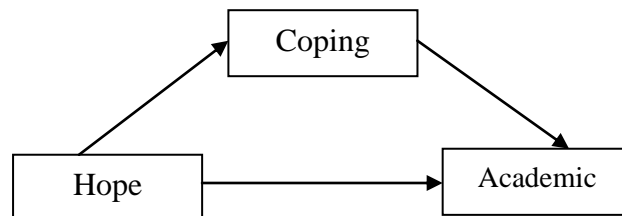
Both concepts have been thoroughly reviewed in last decades within the framework of positive psychology which give emphasis on human growth and strengths as well. It was noted that hope and optimism have been well used in daily practices; research has proven that they are correlated but manifest constructs (Gallagher & Lopez, 2009; Ho et al; 2011; Magaletta & Oliver, 1999; Wong & Lim, 2009). Hope was visualized as a route to motivate oneself and reach a determined goal (Synder, 2002).

ABOUT THE PAPER

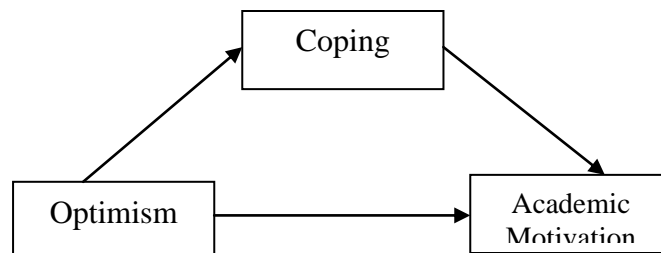
The present paper aims to understand the relationship between hope and optimism as a predictor of academic motivation among students. It aims to understand that if a student is hopeful and optimistic, then what is the underlying association of these constructs with the academic motivation among students that helps them perform better in their academic life.

The present paper also aims at understanding the role of coping (avoidance, proactive and emotional coping) as a mediator between hope and optimism and academic motivation. The present paper discusses two models of mediation as shown below.

Model 1



Model 2



THE MEDIATING ROLE OF COPING STYLES

We are proposing that proactive coping, avoidance coping and emotion coping mediate the relationship between hope and optimism affect academic motivation. Baron and Kenny (1986) posit that mediation is supported if each of the following is demonstrated: (a) The first regression equation shows that the independent variable relates to the dependent variable, (b) the second equation shows that the independent variable relates to the mediating variable, and (c) the third regression shows that the mediating variable relates to the dependent variable and the relationship of the independent variable with the dependent variable is significantly lower in magnitude in the third equation than in the second. Support for full mediation can be argued when the independent variable does not relate to the dependent variable when the mediating variable is added to the equation.

PARTICIPANTS

One hundred and twenty college students (83 males and 37 females) were randomly selected. All these students were in the engineering class and had a subject of psychology in their syllabus. A descriptive analysis of the sample that was covered for the present research paper is mentioned as under.

Gender	Mean Age	Range	SD
Male	18.81	6	1.294
Female	19	6	1.536

RESEARCH INSTRUMENTS

The present research paper is based on a series of standardized scales for the different behavioral constructs that have been analyzed. A detail of the same in regard to the scales that have used in the present paper is described as under.

Optimism Scale: The life orientation test by Scheier (1994) was used to measure the levels of optimism level of an individual. The scale is a 10-item Likert scale with options ranging from strongly disagree (0) to strongly agree (4). The scale has cronbach alpha of 0.95.

The Adult Hope Scale: The scale was developed by Synder (1991). It consists of 12 items measuring dispositional hope. It consists of 12-items developed on 8-point Likert-type scale ranging from 1 (definitely false) to 8 (definitely true). The scale has cronbach alpha of 0.78.

Proactive Coping Scale: The scale was developed by Esther Greenglass consists of 14 items and combines autonomous goal setting with self-regulatory goal attainment cognitions and behaviour. The proactive coping subscale consists of 14 items and ratings are made on a 5-point

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scale from 1 (not at all true) to 4 (completely true). The final internal consistency in the current sample was acceptable for the proactive coping subscale ($\alpha = .66$).

Academic Motivation Scale: This scale was used to assess students' academic motivation. This scale is composed of seven subscales with four items. Three subscales assess types of intrinsic motivation: motivation to know, to accomplish things, and to experience stimulation.

The three intrinsic subscales were combined to form one intrinsic motivation subscale (Vallerand & Ratelle, 2002). The other three subscales assess three types of extrinsic motivation: external regulation, interjected regulation, and identified regulation, the latter assessing a motivation. Students were asked, "Why are you pursuing academic activities?" The 28 items were scored on a 7-point scale (i.e., from 1 "Do not agree at all" to 7 "Very strongly agree"). Alpha coefficients obtained for those seven subscales ranged from .62 to .87.

PROCEDURE

The survey forms containing all four scales (Optimism Scale, The Adult Hope Scale, Proactive Coping Scale and Academic Motivation Scale) and demographic questions were administered to the randomly selected group of students. Before asking the students to provide their responses, they were provided information about the purpose of the study and an informed consent was taken. The respondents were allowed and encouraged to express their honest feelings without any bias.

RESULTS AND INTERPRETATIONS

The models of mediation were tested for all the three kinds of coping styles (avoidance coping, proactive coping and emotional coping) with the independent variables hope and optimism separately to see their impacts on the dependant variable (academic motivation). The results below deal each of the models separately.

Model 1:

The specifications of the model are mentioned as under:

Independent Variable (IV) : Optimism

Mediating Variable (MV) : Avoidance Coping

Dependant Variable (DV) : Academic motivation

The current model assumes that optimism is a predictor for academic motivation and it exerts its influence through a mediating variable called avoidance coping. This means that the effect of being optimistic and having a good academic performance is routed through how well students handle his/her difficult situations of failure and remain focused and optimistic.

Further the relationships have been tested using linear regression and three such regression equations were built and tested, as shown in the grid below.

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Regression Equation	DV	IV(s)
Equation 1	Academic Motivation	Optimism
Equation 2	Avoidance Coping	Optimism
Equation 3	Academic Motivation	Optimism and Avoidance Coping

Results from the three regression equations are summarized in the table as under.

Variables		β	Std. Error	T	Sig.	R	R^2	Adjusted R^2	F	Sig.
Equation 1		0.205	0.114	-1.799	0.075	.163 ^a	0.027	0.018	3.238	.075 ^b
Equation 2		-.027	.024	-1.094	.276	.100 ^a	.010	.002	1.197	.276 ^b
Equation 3	Avoidance Coping	-0.731	0.458	-1.594	0.114	.218 ^a	0.047	0.031	2.911	.058 ^b
	Optimism	0.191	0.113	-1.686	0.094					

Results from equation 1 shows that Optimism is a significant predictor of Academic Motivation at 90% Confidence Interval ($p < 0.1$). The model explains only around 3% of the variation in the dependant variable ($R^2 = 0.027$).

Further exploring for mediation effects, equation 2 explores if Optimism is a predictor for Avoidance Coping. Results show that there is no significant relationship between the two at 95% Confidence Interval ($p = 0.276$). This leads to the fact that there is no mediation effect that needs to be tested in a further model as there is no significant relationship between the predictor and moderator in the mediation model.

Still, we further tested the same to have a confirmatory approach in Model 3 with Academic Motivation as the Dependant variable and Optimism and Avoidance Coping as the predictors. Results show that Avoidance Coping is not a significant predictor of Academic Motivation at 90% CI ($p = 0.114$).

Results show that optimistic state of mind does lead to a better academic performance, sans the effect of avoidance coping. Further digging might also lead to the fact that avoidance coping is a temporary state of mind and a more grounding behavioural aspect like being optimistic rules over the fact.

Model 2:

The specifications of the model are mentioned as under:

Independent Variable (IV) : Optimism

Mediating Variable (MV) : Emotional Coping

Dependant Variable (DV) : Academic motivation

Assessing the Role of Coping Styles as Mediators for Hope and Optimism in Measuring Academic Motivation among First Generation Learners

The current model assumes that optimism is a predictor for academic motivation and it exerts its influence through a mediating variable called emotional coping. The model assumes that being optimistic does help in higher academic motivation, but is also governed by how well a student handles his/her emotions.

Further the relationships have been tested using linear regression and three such regression equations were built and tested, as mentioned in the grid below.

Regression Equation	DV	IV(s)
Equation 1	Academic Motivation	Optimism
Equation 2	Emotional Coping	Optimism
Equation 3	Academic Motivation	Optimism and Emotional Coping

Results from the three regression equations are summarized in the table as under.

Variables		β	Std. Error	T	Sig.	R	R ²	Adjusted R ²	F	Sig.
Equation 1		0.205	0.114	-1.799	0.075	.163 ^a	0.027	0.018	3.238	.075 ^b
Equation 2		.085	.039	2.148	.034	.194 ^a	.038	.029	4.615	.034 ^b
Equation 3	Emotional Coping	0.073	0.268	0.272	0.786	.165 ^a	0.027	0.011	1.643	.198 ^b
	Optimism	0.211	0.117	-1.811	0.073					

Result from equation 2 for mediation effects shows that there is a significant relationship between academic motivation and emotional coping at 95% Confidence Interval ($p=0.034$). This leads to the fact that there might be a mediation effect that needs to be tested in a further equation.

We further tested the same to have a confirmatory approach in equation 3 with Academic Motivation as the Dependant variable and Optimism and Emotion Coping as the predictors. Results show that emotion Coping is not a significant predictor of Academic Motivation at 90% CI ($p=0.786$).

Partial Mediation

Since equation 2 was significant at 0.034 it is partial mediation between Emotion coping and academic motivation.

Model 3:

The specifications of the model are mentioned as under:

Independent Variable (IV) : Optimism

Mediating Variable (MV) : Proactive Coping

Dependant Variable (DV) : Academic motivation

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The current model assumes that optimism is a predictor for academic motivation and it exerts its influence through a mediating variable called proactive coping. This means that the effect of being optimistic and having a good academic performance is routed through how well students handle his/her difficult situations of failure and remain focused and optimistic.

Further the relationships have been tested using linear regressions and three such regression equations were built and tested, as mentioned in the grid below.

Regression Equation	DV	IV(s)
Equation 1	Academic Motivation	Optimism
Equation 2	Proactive Coping	Optimism
Equation 3	Academic Motivation	Optimism and Proactive Coping

Results from the three regression equations are summarized in the table as under.

Variables		β	Std. Error	T	Sig.	R	R ²	Adjusted R ²	F	Sig.
Equation 1		0.205	0.114	-1.799	0.075	.163 ^a	0.027	0.018	3.238	.075 ^b
Equation 2		.036	.063	.579	.564	.053 ^a	.003	-.006	.336	.564 ^b
Equation 3	Proactive Coping	0.563	0.159	3.53	0.001	.347 ^a	0.12	0.105	8.008	.001 ^b
	Optimism	0.225	0.109	-2.07	0.041					

Exploring for mediation effect of proactive coping, equation 2 explores if Optimism is a predictor for Proactive Coping. Results show that there is no significant relationship between the two at 95% Confidence Interval ($p=0.564$). This leads to the fact that there is no mediation effect that needs to be tested in a further model as there is no significant relationship between the predictor and moderator in the mediation model.

Still, we further tested the same to have a confirmatory approach in Model 3 with Academic Motivation as the Dependant variable and Optimism and Proactive Coping as the predictors. Results show that proactive Coping is highly significant predictor of Academic Motivation at 99% CI ($p=0.001$).

Model 4:

The specifications of the model are mentioned as under:

Independent Variable (IV) : Hope

Mediating Variable (MV) : Avoidance Coping

Dependant Variable (DV) : Academic motivation

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The current model assumes that hope is a predictor for academic motivation and it exerts its influence through a mediating variable called avoidance coping. This means that the effect of being hopeful and having a good academic performance is routed through how well person/students handle his/her difficult situations of failure and remain focussed and hopeful.

Further the relationships have been tested using linear regressions and three such regression equations were built and tested, as mentioned in the grid below.

Regression Equation	DV	IV(s)
Equation 1	Academic Motivation	Hope
Equation 2	Avoidance Coping	Hope
Equation 3	Academic Motivation	Hope and Avoidance Coping

Results from the three regression equations are summarized in the table as under.

Variables		β	Std. Error	T	Sig.	R	R ²	Adjusted R ²	F	Sig.
Equation 1		0.246	0.122	2.014	0.046	.182 ^a	0.033	0.025	4.056	.046 ^b
Equation 2		-.027	.024	-1.094	.276	.100 ^a	.010	.002	1.197	.276 ^b
Equation 3	Avoidance Coping	0.227	0.122	1.861	0.065	.229 ^a	0.052	0.036	3.23	.043 ^b
	Hope	-0.704	0.458	-1.535	0.127					

Results from equation 1 shows that Hope is a significant predictor of Academic Motivation at 95% Confidence Interval ($p < 0.05$). The equation explains only around 3% of the variation in the dependant variable ($R^2 = 0.033$).

Further exploring for mediation effects, equation 2 explores if Hope is a predictor for Avoidance Coping. Results show that there is no significant relationship between the two at 99% Confidence Interval ($p = 0.276$). This leads to the fact that there is no mediation effect that needs to be tested in a further model as there is no significant relationship between the predictor and moderator in the mediation model.

Still, we further tested the same to have a confirmatory approach in Model 3 with Academic Motivation as the Dependant variable and Hope and Avoidance Coping as the predictors. Results show that Avoidance Coping is not a significant predictor of Academic Motivation at 90% CI ($p = 0.065$).

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Model 5:

The specifications of the model are mentioned as under:

Independent Variable (IV) : Hope
 Mediating Variable (MV) : Emotional Coping
 Dependant Variable (DV) : Academic motivation

The current model assumes that hope is a predictor for academic motivation and it exerts its influence through a mediating variable called emotional coping. This means that the effect of being hopeful and having a good academic performance is routed through how well person/students handle his/her difficult situations of failure and remain focused and hopeful.

Further the relationships have been tested using linear regressions and three such regression equations were built and tested, as mentioned in the grid below.

Regression Equation	DV	IV(s)
Equation 1	Academic Motivation	Hope
Equation 2	Emotional Coping	Hope
Equation 3	Academic Motivation	Hope and Emotional Coping

Results from the three regression equations are summarized in the table as under.

Variables	β	Std. Error	T	Sig.	R	R ²	Adjusted R ²	F	Sig.	
Equation 1	0.246	0.122	2.014	0.046	.182 ^a	0.033	0.025	4.056	.046 ^b	
Equation 2	.092	.042	2.174	.032	.196 ^a	.039	.030	4.726	.032 ^b	
Equation 3	Emotional Coping	-0.129	0.267	-0.484	-0.629	.188 ^a	0.035	0.019	2.132	.123 ^b
	Hope	0.258	0.125	2.063	0.041					

Results from equation 1 shows that Hope is a significant predictor of Academic Motivation at 95% Confidence Interval ($p < 0.05$). Further exploring for mediation effects, equation 2 explores if Hope is a predictor for Emotional Coping. Results show that there is significant relationship between the two at 95% Confidence Interval ($p = 0.032$). This leads to the fact that there might be a mediation effect that needs to be tested in a further model as there is significant relationship between the predictor and moderator in the mediation model.

Further testing for a confirmatory approach in equation 3 with Academic Motivation as the Dependant variable and Hope and emotional Coping as the predictors. Results show that Emotional Coping is not a significant predictor of Academic Motivation at 90% CI ($p = -0.629$).

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Results show that the mediation effect is not channeled through emotional coping, but the latter has an extraneous impact on the outcome variable of academic motivation.

Model 6:
The specifications of the model are mentioned as under:
Independent Variable (IV) : Hope
Mediating Variable (MV) : Proactive Coping
Dependant Variable (DV) : Academic motivation

The current model assumes that hope is a predictor for academic motivation and it exerts its influence through a mediating variable called proactive coping. This means that the effect of being hopeful and having a good academic performance is routed through how well person/students handle his/her difficult situations of failure and remain focused and hopeful.

Further the relationships have been tested using linear regressions and three such regression equations were built and tested, as mentioned in the grid below.

Regression Equation	DV	IV(s)
Equation 1	Academic Motivation	Hope
Equation 2	Proactive Coping	Hope
Equation 3	Academic Motivation	Hope and Proactive Coping

Results from the three regression equations are summarized in the table as under.

Variables		β	Std. Error	T	Sig.	R	R ²	Adjusted R ²	F	Sig.
Equation 1		0.246	0.122	2.014	0.046	.182 ^a	0.033	0.025	4.056	.046 ^b
Equation 2		.374	.058	6.414	.000	.508 ^a	.259	.252	41.145	.000 ^b
Equation 3	Proactive Coping	0.506	0.188	2.689	0.008	.299 ^a	0.09	0.074	5.751	.004 ^b
	Hope	0.057	0.138	0.412	0.681					

Results from equation 1 shows that Hope is a significant predictor of Academic Motivation at 95% Confidence Interval ($p < 0.05$).

Further exploring for mediation effects, equation 2 explores if Hope is a predictor for proactive Coping. Results show that there is significant relationship between the two at 99% Confidence Interval ($p = 0.000$). This leads to the fact that there might be a mediation effect of proactive coping on academic motivation that needs to be tested in a further confirmatory model.

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Equation 3 tests the mediation effect with Academic Motivation as the Dependant variable and Hope and proactive Coping as the predictors. Results show that proactive Coping is a significant predictor of Academic Motivation at 99% CI ($p = 0.008$).

Partial Mediation

Since from equation 1 to equation 3, the standardized regression coefficient of hope is reduced by 0.189 points, that confirms that there is a partial mediation effect of proactive coping on hope in determining academic motivation among students.

DISCUSSION

Academic motivation was analyzed with optimism as predictor variable it was seen at a p value of .075 with F statistic of 3.328. The model explains 1.8% of variance in the dependent variable academic motivation (Adjusted R Square = .018). We have used linear regression model where independent variable hope and optimism, dependent variable academic motivation and moderating variable is avoidance coping, proactive coping and emotion coping. Optimism as an independent variable doesn't have an impact on academic motivation score of students ($p = .075$ at 95% confidence interval). But the results of regression show that the interaction variables have a significant impact on academic score. Thus results depicted the performance indicator of academic motivation score doesn't only on cognitive dimension of optimism, but non cognitive dimension has a fair role to play in improving performance indicator. Hope as an individual variable is significant and all interaction variables are significant. Students hope that they will get better marks in future and put better effort. Whereas, optimistic individuals are not putting better effort, have to work towards it. So, this shall enhance impact on academic motivation.

There are no significant relationship between hope and avoidance coping and similarly no significant relationship with emotional coping in second model of linear regression analysis. The findings reported a significant relationship between hope and proactive coping which further depicts partial mediation. The increase in hope was expected and consistent relationships with other studies to foster goal-directed thinking (Cheavens et al.2006;Curry et al; 1999; Klausner et al 1998,2000; Lopez et al.2000a;MacLeod et al.2007).We suggest further research include hope measures to suspect this relationship. Nevertheless future studies are needed to further examine this issue. In the present study the result is statistically significant by time but unlikely to be a meaningful finding.

FUTURE SCOPE

Enhancing hope in teachers leads to hopeful youth. The keen observations noted facilitating adjustment in youth through direct intervention and consultation for youth problems and fears. Faculty fraternity must establish must establish an atmosphere where students must plants seeds of hope in their life and career goals. Students must be open to doors of growth building stretch wherein students can enhance from previous knowledge or insights. Academicians play essential

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and vital role in keeping individuals engaged and help them flourish in their life goals also achieve targets outside college.

Hope can flow from one person to another's life, maximizes growth and positive living. Psychologist can facilitate hope and help students increase and achieve academic motivation. We observed maximizing hope thinking in academic settings, encourages growth of human, mind-set and performance. Everyone's hope can grow through their target and avoiding negative people and environment. Hopeful thinking can enhance and enlighten lifetime learning and psychologist helps them to keep this lesson alive.

REFERENCES

1. Aldwin, C. M. (1999). Stress, coping, and development: An integrative approach. New York: Guilford.
2. Aldwin, C. M., & Revenson, T. A. (1987). Does coping help? A re-examination of the relationship between coping and mental health. *Journal of Personality and Social Psychology*, 53, 337-348.
3. Barron, R. M., & Kenny, D. A. (1986). The mediator-moderator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology*, 51, 1173-1182.
4. Bossert, S., Berger, M., Krieg, J. C., Schrieber, W., Junker, M., & von Zerssen, S. (1988). Cortisol response to various stressful situations: Relationship to personality variables and coping styles. *Neuropsychobiology*, 20, 36-42.
5. Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically-based approach. *Journal of Personality and Social Psychology*, 56, 267-283.
6. D. B. (2003). Hope theory, measurements, and applications to school psychology. *School Psychology Quarterly*, 18, 122-139.
7. Snyder, C. R., & Dinoff, B. L. (1999). Coping: Where have you been? In C. R. Snyder (Ed.), *Coping: The psychology of what works* (pp. 3-19). New York: Oxford University Press.
8. Subjective health complaints: Is coping more important than control? *Work & Stress*, 13, 238-252.
9. Folkman, S., & Moskowitz, J. T. (2000). Positive affect and the other side of coping. *American Psychologist*, 55, 647-654.
9. Yi, J. P., Smith, R. E., Vitaliano, P. P. (2005). Stress- resilience, illness, and coping: A person-focused investigation of young women athletes. *Journal of Behavioral Medicine*,

Religiosity and Geriatric Mental Health: Exploring the Mediating Role of Coping Strategies

Dr. Ruchi Gautam*

ABSTRACT

The aim of this study was to explore the mediating role of coping strategies in the relationship between bent towards religion and psychiatric indicators of mental health. 390 subjects with the age ranging from 50-90 years participated in the study. Results indicated that bent towards religion significantly predicted mental health. Except proactive coping, the remaining six coping strategies (preventive, reflective, strategic, emotional support seeking, instrumental support seeking and avoidance coping) significantly mediated the relationship between bent towards religion and psychiatric indicators of mental health.

Keywords: *Geriatric mental health, religiosity, coping strategies*

INTRODUCTION

Although the modern definition of mental health encompasses “the successful performance of mental function resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and cope with adversity” (Satcher, 2000, p. 89), it has also been considered as a “complete state in which individuals are free of psychopathology and flourishing....with high levels of emotional, psychological, and social well-being” (Keyes, 2005, p. 539). According to Keyes (2005), “mental health and mental illness are not opposite ends of a single continuum; rather, they constitute distinct but correlated axes that suggest that mental health should be viewed as a complete state” (p. 546).

Contemporary research on mental health issues and ageing have primarily focused upon attitudes and beliefs about mental health among older adults (Conner et al., 2010), life regrets and pride among low-income older adults (Choi & Jun, 2009), ageing and worry in older adults (Nuevo, Wetherell, Montorio, Ruiz & Cabrera, 2009), personality traits and perceived social support among depressed older adults (Cukrowicz, Franzese, Thorp, Cheavens & Lynch, 2008), gender differences in coping with functional disability in older married couples (Robb, Small & Haley, 2008), happiness and congruence (Bishop, Martin & Poon, 2006), age differences in the relationship between anxiety and recall (Andreoletti, Veratti & Lachman, 2006), health and changes in late-life drinking patterns of older adults (Moos, Brennan, Schutte & Moos, 2005),

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- life strain and psychological distress of older women and men (Boey & Chiu, 2005), anxiety on attention processes in older adults (Fox & Knight, 2005), social support (Blazer, 2005), globalization as a challenge to the opportunities for elderly (Yap, Thang & Traphagan, 2005), lack of independence in old age (Jackson, 2002), family as care provider (Phillips & Chan, 2002), age with dependency (Yeon, 2000; Schulz, 1999) and life events and psychological distress in married and widowed older women (Murdocka, Guarnaccia, Hayslip, & McKibbin, 1998). India has the second largest geriatric population in the world but an extensive study of the psychiatric indicators of mental health has not been reported. Apprehending the fact that mental health and mental illness are distinct but correlated axes it is the need of the time that the world's second biggest populace be studied. The culture known for its religious beliefs and practices demands that the mental health study in that very culture should also hold religiosity as a determinant.

Literature indicates that religiosity is the key issue in understanding mental health of the geriatric population as they are also significant to the coping processes. According to Folkman and Lazarus (1980) "spirituality/ religiosity is a stable characteristic of a person's personality and an important resource in coping with stress....[It] has been linked to better health outcomes" (p. 49). It has been observed that there is a significant increase in spirituality from late middle age (mid 50s to mid 60s) to the old age (late 60s to mid 70s). Studies confirm that spirituality reflected in old age (late 60s to mid 70s) is correlated with cognitive commitment. Sense of meaning and purpose in life is positively related to happiness, life satisfaction, and general psychological well-being among people of all age groups (Debats, 2000). Well-being is based on "meaning and purpose in life and the desire to be transformed along lines that are cosmic, spiritual and in communion with a higher entity than oneself" (Tronstam, 1997; cited in Fry, 2000, p. 376). Religiosity protects older people from depression, anxiety, distress, lack of support, and loneliness in ageing (Koenig, 1997). Studies have connected intrinsic religious orientation with few psychiatric disorders and sense of purpose in life (Donahue, 1985). Koenig and Futterman (1994) have reported that overall religious and spiritual experiences are positively related with physical as well as mental health (cited in Cheever et al., 2005).

Ageing presents many kinds of problems, adversities, and life experiences before a graying individual. In every culture the elderly people have to cope from the adversities. Coping refers to "the cognitive way of managing the intake of emotionally arousing information" (Thompson, 1991, p. 1659). Religiosity is beneficial for health and is also helpful for coping with the adversities and challenges in old age (Ellison, 1994). The coping behaviour induces a sense of well-being in the elderly people which, in turn, is related to the feeling of security and balance. The intellectual and emotional perceived support provided by near and dear ones also facilitates coping in the elderly people.

Hallis and Slone (1999) found coping strategies as a mediator in the relationship between exposure to political life events and psychological distress. Coping is a kind of adaptation process which may be applied in stressful situations. The adaptation process of coping depends

on the immediate context which may occur in form of personality style or coping as a process (Lazarus, 1993). As pointed out by Haan (1965), coping is the best way to adapt and adaptation is good and positive thing towards the change or stressful event. Given the complexity of real life situations, it is imperative that coping might play a role of mediating variable. Literature suggests that coping strategies play a mediating role between the effect of stress and quality of life outcomes. However, there is no consensus regarding which coping strategies are most effective in reducing psychopathological and distress symptoms (Aldwin et al., 1987; Carr, 1988; Thoits, 1995). To the best of our knowledge no study has examined the mediating role of the set of coping strategies (proactive, preventive, reflective, strategic planning, instrumental support seeking, emotional support seeking, and avoidance coping) and hence this needs to be thoroughly investigated.

The Indian geriatric population is currently the second largest in the world. In 1961 the geriatric population of India was 24 million which increased to 43 million in 1981 and 57 million in 1991, respectively. According to the 2001 census, the geriatric population of India was 77 million. The proportion of older people in the population of India rose from 5.63% in 1961 to 6.58% in 1991 (Rajan, Mishra & Sarma, 1999) and further increased to 7.5% in the year 2001. The projected growth of the Indian population (Rajan, 2006) shows further rise in the geriatric population. Looking at the current scenario in India, or for that matter even globally, a comprehensive investigation of this issue is need of the time. Several civilizations, including India, has religiosity deeply entrenched into their social system and inclusion of religious inclination/orientation to mental health research becomes imperative.

The aim of this study was to explore the relationship between bent towards religion and mental health of the Indian geriatric population. It further explored the mediating roles of coping strategies hypothesizing that the proactive, preventive, reflective, strategic, emotional support seeking, instrumental support seeking and avoidance coping strategies would mediate the relationship between bent towards religion and psychiatric indicators of mental health.

METHOD

Participants

390 participants (198 males and 192 females) were purposively selected from two different cities of India. The age of the participants ranged from 50-90 years ($M = 64.85$, $SD = 9.63$) with 107 participants between 50-60 years, 154 participants between 60-70 years, and 129 participants above 70 years of age. The mean age of male and female participants were 63.92 years ($SD = 9.84$) and 66.30 years ($SD = 9.65$), respectively. All the participants were Hindu. 53.3 % of the participants were staying without their descendants whereas 46.7% of them were staying with them. 30.70% of the participants had passed higher secondary degree, 41.02% of them were graduates, and 28.20% of them had higher degrees, respectively.

Materials

Ways of Religious Coping Scale (WORCS: Boudreaux, Catz, Ryan, Amaral-Melendez, & Brantley, 1995)- WORCS is a 40-item scale where the participants indicated how often they engaged in the behaviour described in the given items of the scale. The responses are obtained on 5- point rating scale where 0 = not used at all/does not apply, 1 = used sometimes, 2 = used often, 3 = used very often, and 4 = used always. The scale consists of two dimensions- internal/private and external/social. The Cronbach alphas reported for the total WORCS, internal/ private scale, and external/ social scale are .95, .97, and .93, respectively.

Proactive Coping Inventory (PCI: Greenglass et. al., 1999)- The Hindi adaptation of PCI (Bhushan, Gautam, & Greenglass, 2010) was administered. The 55-item PCI consists of seven sub-scales- proactive coping (14 items), reflective coping (11 items), preventive coping (10 items), strategic coping (4 items), emotional support seeking (5 items), instrumental support seeking (8 items), and avoidance coping (3 items). The responses are obtained on 4- point rating scale where, 1 = not at all true, 2 = barely true, 3 = somewhat true, and 4 = completely true. The reported Cronbach alpha are .85 (proactive coping), .79 (reflective coping), .83 (preventive coping), .71(strategic coping), .85 (instrumental support seeking), .73 (emotional support seeking), and .61 (avoidance coping).

Clinical Assessment Scale for Elderly (CASE: Reynolds & Bigler, 2001)- CASE consists of 199 items, including lie and validity subscales. It consists of ten subscales, namely anxiety (24 items), cognitive competence (28 items), depression (20 items), fear of aging (14 items), obsessive-compulsive (17 items), paranoia (13items), psychoticism (21items), soamtization (17items), mania (13 items), substance abuse (19 items), lie (8 items), and validity (5 items). The responses are obtained on 5- point rating scale, where 1 = daily, 2 = weekly, 3 = monthly, 4 = once a year or less, and 5 = never. The reported alpha scores ranges from .92 - .94 (anxiety), .92 - .95 (cognitive competence), .92 - .94 (depression), .86 - .93 (fear of aging), .85 - .92 (obsessive-compulsive), .79 - .89 (paranoia), .81 - .90 (psychoticism), .83 - .88 (somatization), .78 - .82 (mania), and .81 - .98 (substance abuse).

Procedure

The prospective participants were personally approached and informed about the nature of the study and its importance. They were briefed about the voluntary nature of participation, maintenance of anonymity, and confidentiality of the data. Further, they were told not to respond to supposedly uncomfortable/ distressing item(s). They were updated about the right to withdraw from this study, if felt so. Only those in agreement were provided the informed consent form. Upon receiving the consent they were provided with a booklet comprising all the questionnaires (adapted) of the present study. All the respondents were proficient in Hindi. No two participants were from the same family. All the questionnaires were self-administered and the participants were encouraged to choose the options that best represented their preference. They were asked to

communicate their true and honest response as there was no right or wrong answer to any given item.

RESULTS

The primary objective of this study was to explore the mediating role of various coping strategies between bent towards religion and psychiatric indicators of mental health. Regression analyses were used to examine the mediation effects of the respective coping strategies. The condition of significant mediation was based on the F-ratios and β coefficients obtained from the following three regression equations -

$$Y = \beta_0 + \beta_1 X \quad (I)$$

$$Z = \beta_0 + \beta_2 X \quad (II)$$

$$Y = \beta_0 + \beta_3 X + \beta_4 \quad (III)$$

Where,

Y = dependent variable, X = independent variable, Z = mediating variable, β = Regression coefficient

The criteria for full mediation necessitated that equation 1 ($Y = \beta_0 + \beta_1 X$) and 2 ($Z = \beta_0 + \beta_2 X$) should be significant. Further, in equation 3 ($Y = \beta_0 + \beta_3 X + \beta_4$), β_4 should be significant and β_3 should not be significant. The criteria for partial mediation demanded that equation 1 ($Y = \beta_0 + \beta_1 X$) and 2 ($Z = \beta_0 + \beta_2 X$) should be significant, and in equation 3 ($Y = \beta_0 + \beta_3 X + \beta_4$), β_4 should not be significant and β_3 should be significant.

The regression coefficients were not significant for proactive coping. The regression coefficients suggest that preventive coping partially mediated the relationship between bent towards religion and anxiety, cognitive competence, depression, psychoticism, fear of ageing, paranoia, and somatization. Table 1 summarizes the findings of the mediation analysis. The first two equations examining whether preventive coping mediated the relationship between bent towards religion and dimensions of CASE were significant for anxiety (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.19, p < .001$), cognitive competence (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = .16, p < .001$), depression (equation 1: $\beta = -.21, p < .001$; equation 2: $\beta = .16, p < .001$), psychoticism (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.16, p < .001$), fear of ageing (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = .16, p < .001$), paranoia (equation 1: $\beta = -.11, p < .02$; equation 2: $\beta = .16, p < .001$), somatization (equation 1: $\beta = -.27, p < .001$; equation 2: $\beta = .16, p < .001$). The third equation was also significant for anxiety (bent towards religion: $\beta = -.13, p < .001$; preventive coping: $\beta = -.17, p < .001$), cognitive competence (bent towards religion: $\beta = -.17, p < .001$; preventive coping: $\beta = -.15, p < .001$), depression (bent towards religion: $\beta = -.18, p < .001$; preventive coping: $\beta = -.22, p < .001$), psychoticism (bent towards religion: $\beta = -.13, p < .001$; preventive coping: $\beta = -.14, p < .001$), fear of ageing (bent towards religion: $\beta = -.16, p < .001$; preventive coping: $\beta = -.24, p < .001$), paranoia (bent towards religion: $\beta = -.08, p < .09$;

preventive coping: $\beta = -.15, p < .001$), and somatization (bent towards religion: $\beta = -.25, p < .001$; preventive coping: $\beta = -.12, p < .01$), respectively. The R^2 of the third equation was greater than R^2 of the first equation anxiety (equation 3=.058, equation 1=.028), cognitive competence (equation 3=.065, equation 1=.042), depression (equation 3=.097, equation 1=.047), psychoticism (equation 3=.046, equation 1=.026), fear of ageing (equation 3=.097, equation 1=.041), paranoia (equation 3=.034, equation 1=.012), and somatization (equation 3=.090, equation 1=.075). The regression coefficients were no nsignificant for obsession-compulsion, and substance abuse. Of the ten mental health indicators, preventive coping partially mediated the relationship between bent towards religion and seven mental health indicators (anxiety, cognitive-competence, depression, psychoticism, fear of ageing, paranoia, and somatization).

Table 1 about here

The regression coefficients examining reflective coping as a mediator between the relationship between bent towards religion and dimensions of CASE suggested that the first two equations were significant for anxiety (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.16, p < .001$), cognitive competence (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.14, p < .001$), depression (equation 1: $\beta = -.21, p < .001$; equation 2: $\beta = -.25, p < .001$), psychoticism (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.17, p < .001$), fear of ageing (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.27, p < .001$), obsession-compulsion (equation 1: $\beta = -.11, p < .01$; equation 2: $\beta = -.12, p < .01$), paranoia (equation 1: $\beta = -.11, p < .02$; equation 2: $\beta = -.17, p < .001$), and somatization (equation 1: $\beta = -.25, p < .001$; equation 2: $\beta = -.14, p < .001$). The third equation was also significant for anxiety (bent towards religion: $\beta = -.14, p < .001$; reflective coping: $\beta = -.14, p < .001$), cognitive competence (bent towards religion: $\beta = -.19, p < .001$; reflective coping: $\beta = -.11, p < .001$), depression (bent towards religion: $\beta = -.22, p < .001$; reflective coping: $\beta = -.22, p < .001$), psychoticism (bent towards religion: $\beta = -.14, p < .001$; reflective coping: $\beta = -.16, p < .001$), fear of ageing (bent towards religion: $\beta = -.25, p < .001$; reflective coping: $\beta = -.25, p < .001$), obsession-compulsion (bent towards religion: $\beta = -.10, p < .02$; reflective coping: $\beta = -.11, p < .02$), paranoia (bent towards religion: $\beta = -.09, p < .07$; reflective coping: $\beta = -.16, p < .001$), and somatization (bent towards religion: $\beta = -.26, p < .01$; reflective coping: $\beta = -.11, p < .01$). The R^2 of the third equation was greater than R^2 of the first equation anxiety (equation 3=.049, equation 1=.028), cognitive competence (equation 3=.055, equation 1=.042), depression (equation 3=.098, equation 1=.047), psychoticism (equation 3=.052, equation 1=.026), fear of ageing (equation 3=.104, equation 1=.041), obsession-compulsion (equation 3=.027, equation 1=.014), paranoia (equation 3=.039, equation 1=.012), and somatization (equation 3=.088, equation 1=.075). The regression coefficients were nonsignificant for mania and substance abuse. Of the ten indicators, reflective coping partially mediated the relationship between bent towards religion and eight of the indicators (anxiety, cognitive-competence, depression, psychoticism, and fear of ageing, obsession-compulsion, paranoia, and somatization).

The regression coefficients examining strategic coping as a mediator between the relationship between bent towards religion and dimensions of CASE suggested that the first two equations were significant for anxiety (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.17, p < .001$), cognitive competence (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.19, p < .001$), depression (equation 1: $\beta = -.21, p < .001$; equation 2: $\beta = -.27, p < .001$), psychoticism (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.18, p < .001$), fear of ageing (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.27, p < .001$), obsession-compulsion (equation 1: $\beta = -.11, p < .01$; equation 2: $\beta = -.10, p < .03$), paranoia (equation 1: $\beta = -.11, p < .02$; equation 2: $\beta = -.10, p < .04$), and somatization (equation 1: $\beta = -.25, p < .001$; equation 2: $\beta = -.16, p < .001$). The third equation was also significant for anxiety (bent towards religion: $\beta = -.14, p < .001$; strategic coping: $\beta = -.15, p < .001$), cognitive competence (bent towards religion: $\beta = -.18, p < .001$; strategic coping: $\beta = -.17, p < .001$), depression (bent towards religion: $\beta = -.18, p < .001$; strategic coping: $\beta = -.25, p < .001$), psychoticism (bent towards religion: $\beta = -.14, p < .001$; strategic coping: $\beta = -.17, p < .001$), fear of ageing (bent towards religion: $\beta = -.17, p < .001$; strategic coping: $\beta = -.25, p < .001$), obsession-compulsion (bent towards religion: $\beta = -.10, p < .03$; strategic coping: $\beta = -.09, p < .07$), paranoia (bent towards religion: $\beta = -.10, p < .04$; strategic coping: $\beta = -.09, p < .07$), and somatization (bent towards religion: $\beta = -.26, p < .001$; strategic coping: $\beta = -.13, p < .001$). The R^2 of the third equation was greater than R^2 of the first equation for anxiety (equation 3=.052, equation 1=.028), cognitive competence (equation 3=.071, equation 1=.042), depression (equation 3=.110, equation 1=.047), psychoticism (equation 3=.055, equation 1=.026), fear of ageing (equation 3=.107, equation 1=.041), obsession-compulsion (equation 3=.023, equation 1=.014), paranoia (equation 3=.020, equation 1=.012), and somatization (equation 3=.092, equation 1=.075). Of the ten indicators, strategic coping partially mediated the relationship between bent towards religion and eight of the indicators, namely anxiety, cognitive-competence, depression, psychoticism, fear of ageing, obsession-compulsion, paranoia, and somatization. The regression coefficients were non significant for mania and substance abuse.

The regression coefficients examining emotional support seeking as a mediator between the relationship between bent towards religion and dimensions of CASE suggested that the first two equations were significant for anxiety (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.18, p < .001$), cognitive competence (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.18, p < .001$), depression (equation 1: $\beta = -.21, p < .001$; equation 2: $\beta = -.18, p < .001$), psychoticism (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.15, p < .001$), fear of ageing (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.18, p < .001$), obsession-compulsion (equation 1: $\beta = -.11, p < .01$; equation 2: $\beta = -.10, p < .03$), paranoia (equation 1: $\beta = -.11, p < .02$; equation 2: $\beta = -.17, p < .001$), and somatization (equation 1: $\beta = -.27, p < .001$; equation 2: $\beta = .18, p < .001$). The third equation was also significant for anxiety (bent towards religion: $\beta = -.13, p < .001$; emotional support seeking: $\beta = -.15, p < .001$), cognitive competence (bent towards religion: $\beta = -.17, p < .001$; emotional support seeking: $\beta = -.13, p < .001$), depression (bent towards religion: $\beta = -.16, p < .001$; emotional support seeking: $\beta = -.29, p < .001$), psychoticism (bent towards religion: $\beta = -.13, p < .001$; emotional support seeking: $\beta = -.13, p < .01$), fear of ageing (bent towards religion: $\beta = -$

.15, $p < .001$; emotional support seeking: $\beta = -.23$, $p < .001$), obsession-compulsion (bent towards religion: $\beta = -.10$, $p < .04$; emotional support seeking: $\beta = -.08$, $p < .09$), paranoia (bent towards religion: $\beta = -.08$, $p < .11$; emotional support seeking: $\beta = -.15$, $p < .001$), and somatization (bent towards religion: $\beta = -.25$, $p < .001$; emotional support seeking: $\beta = -.10$, $p < .03$). The R^2 of the third equation was greater than R^2 of the first equation for anxiety (equation 3=.052, equation 1=.028), cognitive competence (equation 3=.060, equation 1=.042), depression (equation 3=.129, equation 1=.047), psychoticism (equation 3=.043, equation 1=.026), fear of ageing (equation 3=.094, equation 1=.041), obsession-compulsion (equation 3=.021, equation 1=.014), paranoia (equation 3=.037, equation 1=.012), and somatization (equation 3=.086, equation 1=.075). The regression coefficients indicate that emotional support seeking partially mediated the relationship between bent towards religion and anxiety, cognitive-competence, depression, psychoticism, fear of ageing, obsession-compulsion, paranoia, and somatization. The coefficients were no significant for mania and substance abuse.

The regression coefficients examining instrumental support seeking as a mediator between the relationship between bent towards religion and dimensions of CASE suggested that the first two equations were significant for anxiety (equation 1: $\beta = -.16$, $p < .001$; equation 2: $\beta = .12$, $p < .01$), cognitive competence (equation 1: $\beta = -.20$, $p < .001$; equation 2: $\beta = .12$, $p < .01$), depression (equation 1: $\beta = -.21$, $p < .001$; equation 2: $\beta = .12$, $p < .01$), psychoticism (equation 1: $\beta = -.16$, $p < .001$; equation 2: $\beta = .12$, $p < .01$), fear of ageing (equation 1: $\beta = -.20$, $p < .001$; equation 2: $\beta = .12$, $p < .01$), obsession-compulsion (equation 1: $\beta = -.11$, $p < .01$; equation 2: $\beta = -.12$, $p < .01$), somatization (equation 1: $\beta = -.25$, $p < .001$; equation 2: $\beta = .12$, $p < .01$), and mania (equation 1: $\beta = -.18$, $p < .001$; equation 2: $\beta = .12$, $p < .01$). The third equation was also significant for anxiety (bent towards religion: $\beta = -.15$, $p < .001$; Instrumental support seeking coping: $\beta = -.09$, $p < .05$), cognitive competence (bent towards religion: $\beta = -.18$, $p < .001$; Instrumental support seeking: $\beta = -.12$, $p < .01$), depression (bent towards religion: $\beta = -.19$, $p < .001$; instrumental support seeking: $\beta = -.17$, $p < .001$), psychoticism (bent towards religion: $\beta = -.13$, $p < .01$; instrumental support seeking: $\beta = -.18$, $p < .001$), fear of ageing (bent towards religion: $\beta = -.17$, $p < .001$; instrumental support seeking: $\beta = -.19$, $p < .001$), obsession-compulsion (bent towards religion: $\beta = -.10$, $p < .04$; instrumental support seeking: $\beta = -.12$, $p < .01$), somatization (bent towards religion: $\beta = -.26$, $p < .001$; instrumental support seeking: $\beta = -.11$, $p < .02$), and mania (bent towards religion: $\beta = -.18$, $p < .001$; instrumental support seeking: $\beta = -.05$, $p < .02$). The R^2 of the third equation was greater than R^2 of the first equation for anxiety (equation 3=.037, equation 1=.028), cognitive competence (equation 3=.058, equation 1=.042), depression (equation 3=.078, equation 1=.047), psychoticism (equation 3=.060, equation 1=.026), fear of ageing (equation 3=.076, equation 1=.041), obsession-compulsion (equation 3=.030, equation 1=.014), somatization (equation 3=.088, equation 1=.075), and mania (equation 3=.038, equation 1=.035). The regression coefficients suggest that instrumental support seeking partially mediated the relationship between bent towards religion and eight of the indicators, namely, anxiety, cognitive-competence, depression, psychoticism, fear of ageing, obsession-compulsion, somatization, and mania. The regression coefficients were nonsignificant for paranoia and substance abuse.

The regression coefficients examining avoidance coping as a mediator between the relationship between bent towards religion and dimensions of CASE suggested that the first two equations were significant for cognitive competence (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.12, p < .01$), depression (equation 1: $\beta = -.21, p < .001$; equation 2: $\beta = -.16, p < .001$), psychoticism (equation 1: $\beta = -.16, p < .001$; equation 2: $\beta = -.14, p < .001$), fear of ageing (equation 1: $\beta = -.20, p < .001$; equation 2: $\beta = -.14, p < .001$), and paranoia (equation 1: $\beta = -.11, p < .02$; equation 2: $\beta = -.10, p < .03$). The third equation was also significant for cognitive competence (bent towards religion: $\beta = -.19, p < .001$; avoidance coping: $\beta = -.10, p < .03$), depression (bent towards religion: $\beta = -.20, p < .001$; avoidance coping: $\beta = -.14, p < .001$), psychoticism (bent towards religion: $\beta = -.15, p < .001$; avoidance coping: $\beta = -.13, p < .01$), fear of ageing (bent towards religion: $\beta = -.19, p < .001$; avoidance coping: $\beta = -.13, p < .01$), and paranoia (bent towards religion: $\beta = -.10, p < .04$; avoidance coping: $\beta = -.10, p < .04$). The R^2 of the third equation was greater than R^2 of the first equation for cognitive competence (equation 3=.053, equation 1=.042), depression (equation 3=.069, equation 1=.047), psychoticism (equation 3=.043, equation 1=.026), fear of ageing (equation 3=.059, equation 1=.041), and paranoia (equation 3=.022, equation 1=.012). The regression coefficients were nonsignificant for anxiety, obsession-compulsion, somatization, mania, and substance abuse. Of the ten indicators, avoidance coping partially mediated the relationship between bent towards religion and five of the indicators (cognitive competence, depression, psychoticism, fear of ageing and paranoia).

DISCUSSION

The results of the present study show that bent towards religion significantly affected all indicators of mental health (anxiety, cognitive-competence, depression, psychoticism, fear of ageing, obsession-compulsion, paranoia, somatization, and mania) except substance abuse. Other researchers have also reported that religious and spiritual experiences are positively related with mental health (Ai et al., 1998). Religious involvement of older people has been found to affect their mental health. In older adults the bent towards religion plays a vital role in their pursuit of physical and psychological wellbeing.

Studies on religiosity and anxiety confirm that people with religious commitment have lower rates of anxiety as compared to the non-religious group (Koenig et al., 1993; Thorson & Powell, 1990). Researchers have also found that intrinsic religiosity is associated with low depression and quick healing (Koenig, 1995; Nelson, 1989; O'Conner & Vallerand, 1990) inasmuch as religiosity predicts low depression and more positive attitude towards life (Levin et al., 1996). Koenig (1980) also found that religiously active people had less depression as compared to the religiously inactive people (cited in Koenig, 1995). This stands true regardless of age, sex, race, level of social support, and functional disability.

Few studies have examined the relationship between religion and alcohol or substance abuse. These studies have reported low substance abuse among the religious population (Alexander & Duff, 1991; Krause, 1991). Alcohol usage has been proscribed in several religions and this could discourage alcohol intake or substance abuse. However, results of the present study assert that

substance abuse was not influenced by religiosity. The possible reason could be that certain sects of Hinduism (Shiva and Shakti followers) do not prohibit the usage of alcohol and other substances; rather it is very much practiced/ used.

Besides cultural influence, one might turn out to be more religiously oriented because of some perceived weakness, sense of isolation, and fear of cosmic forces. Ghufraan (2000) found that senior citizen whose spouses were dead were more religious as compared to those older who had their spouses alive. Due to the death of their spouses, the older people may have fear, anxiety, feeling of helplessness and worthlessness regarding their lives. These fear, anxiety and negative feelings may lead one to get indulged in religious practices. Bent towards religion can be a source of ego support and a coping mechanism towards unpredictable, risky environment and stressful events. Religiosity may also raise hope and optimism in the geriatric population. Religious communities might help in the prevention of certain behavioural anomalies and facilitate recovery or healing through community support and individual commitment. Religious involvement can be a kind of coping style which strengthens one's potential to cope with adversities, thus positively influencing their mental health.

Involvement with religious groups could also provide opportunities to discuss and share one's difficulties and adversities, thereby facilitating coping against stressful situations. A sense of meaning and purpose during the later years of life can only be maintained by collective meaning or self-described cosmic connectedness. In old age, the inevitable loss of relationship and productivity can combine with financial strain, thus affecting one's psychological wellbeing. Studies suggest that even in these circumstances individuals with bent towards religion find a sense of personal meaning (Zinnbauer et al., 1997) to move forward in their lives.

Coping strategies are considered to be an important aspect which shows how older people can cope-up with their mental health problems. The usage of preventive coping strategy by religious elderly people helped them minimize signs of mental health problems (anxiety, cognitive competence, depression, psychoticism, fear of ageing, somatization and paranoia). Similarly, religious elderly people also used reflective, strategic, emotional, and instrumental coping strategies to reduce their anxiety, cognitive competence, depression, psychoticism, fear of ageing, obsession-compulsion, paranoia, and somatization. Avoidance coping strategy was used to diminish difficulties pertaining to cognitive competence, depression, psychoticism, fear of ageing, and paranoia. It merits mention that although there is no consensus regarding which coping strategies are most effective in reducing psychopathological and distress symptoms (Aldwin et al., 1987; Carr, 1988; Thoits, 1995) coping strategies mediates the relationship between life events and its psychological consequences (Hallis & Slone, 1999). Religiosity is also a kind of spiritual coping style. Sharing problems with the God could work as a stress releaser. It positively affects mental health outcomes of the frail and the older adults (Ferraro & Koch, 1994; Levin & Chatters, 1998). The style of coping with the life adversities varies from person to person. Some older people may use behavioural alternatives, planning and reframing, and seeking emotional and instrumental support from others whereas others may use preventive

measures and escape behaviour. Earlier studies have also confirmed that religious practices and involvement are beneficial for health (Ellison & Levin, 1998) and are helpful for coping with the adversities and challenges in old age (Ellison, 1994). Studies have observed that religiosity buffers the effects of stress and lead to lower distress (Dein, 1996; Loewenthal, 1995; Worthington et al., 1996; Koenig et al., 1992).

This study contributes in multiple ways to the understanding of mental health issues of the elderly people of the society. Study of the geriatric population has not been pursued by many Indian researchers. Perhaps for the first time in an Indian setting an array of coping strategies and its contribution towards mental health has been systematically investigated. It has also made some applied contribution. The findings of the present study have implications for individuals, social workers, and NGO's working for elderly population. The findings may also be helpful for planning action research and policy making for interventions. Overall, religiosity seems to enhance the geriatric mental health. However, there is a need to take a relook into the structure and processes related to the phenomenon of religiosity and its relevance in the life of older people.

REFERENCES

1. Ai, A. L., Dunkle, R. E., Peterson, C., & Boiling, S. F. (1998). The role of private prayer in psychological recovery among midlife and aged patients following cardiac surgery. *The Gerontological Society of America*, 38, 591-601.
2. Aldwin, C. M., & Revenson, T. A. (1987). Does coping help? A re-examination of the relation between coping and mental health. *Journal of Personality & Social Psychology*, 53, 337-348.
3. Alexander, F., & Duff, R.W. (1991). Influence of religiosity and alcohol use on personal well-being, *Journal of Religious Gerontology*, 8, 11-21.
4. Andreoletti, C., Veratti, B.W., & Lachman, M. E. (2006). Age differences in the relationship between anxiety and recall. *Aging and Mental Health*, 10, 265-271.
5. Bhushan, B., Gautam, R., & Greenglass, E. S. (2010). The Hindi adaptation and standardization of the proactive coping inventory (PCI). *International Journal of Psychology and Psychological Therapy*, 10:2, 79-91.
6. Bishop, A., Martin, P., & Poon, L. (2006). Happiness and congruence in older adulthood: A structural model of life satisfaction. *Aging & Mental Health*, 10, 445-453.
7. Blazer, D. G. (2005). Depression in Late Life: Review and Commentary. *American Journal of Psychiatry*, 162, 705 - 710.
8. Boey, K. W., & Chiu, H. F. K. (2005). Life strain and psychological distress of older women and older men in Hong Kong. *Aging and Mental Health*, 9, 555-562.
9. Boudreaux, E. D., Catz, S., Ryan, L., Amaral-Melendez, M., & Brantley, P. J. (1995) The Ways of Religious Coping Scale: Reliability, validity, and scale development. *Assessment*, 2, 233-241.
10. Carr, V. (1988). Patients' techniques for coping with schizophrenia: An exploratory study. *British Journal of Medical Psychology*, 61, 339-352.

11. Cheever, K. H. Jubilan, B., Dailey, T., Ehrhardt, K., Blumenstein, C. J. M. & Lewis, C. (2005). Surgeons and the spirit: A study on the relationship of religiosity to clinical practice. *Journal of Religion and Health*, 44, 67-80.
12. Choi, N. & Jun, J. (2009). Life regrets and pride among low-income older adults: Relationships with depressive symptoms, current life stressors and coping resources. *Aging and Mental Health*, 13, 213-225.
13. Conner, K. O., Leeb, B., Mayersb, V., Robinsonc, D., Reynolds, C. F., Albertd, S., & Browna, C. (2010). Attitudes and beliefs about mental health among African American older adults suffering from depression. *Journal of Aging Studies*, 24, 266-277.
14. Cukrowicz, K., Franzese, A., Thorp, S., Cheavens, J., Lynch, T. (2008). Personality traits and perceived social support among depressed older adults. *Aging and Mental Health*, 12, 662-669.
15. Debats, D. L. (2000). An inquiry into existential meaning: Theoretical, clinical, and phenomenal perspectives. In G. T. Reker & K. Chamberlain (Eds.), *Exploring existential meaning. Optimizing human development across the life span* (pp. 93-106). Thousand Oaks, CA: Sage.
16. Dein, S. (1996). Religion and mental health. *British Medical Anthropology Review*, 3, 40-49.
17. Donahue, M. J. (1985). Intrinsic and extrinsic religiousness: Review and meta-analysis. *Journal of Personality and Social Psychology*, 48, 400-419.
18. Ellison, C. G., & Levin, J. S. (1998). The religion-health connection: Evidence, theory, and future directions. *Health Education and Behavior*, 25, 700-720.
19. Ellison, C.G. (1994). *Religion, the life stress paradigm, and the study of depression*. In Levin, J. S. (Ed.), *Religion in Aging and Health*. Thousand Oaks, Sage.
20. Ferraro, K. F. & Koch, J. R. (1994). Religion and health among black and white adults: Examining social support and consolation. *Journal for the Scientific Study of Religion*, 33, 362-375.
21. Folkman, S. & Lazarus, R. S. (1980). An analysis of coping in a middle-aged community sample. *Journal of Health and Social Behaviour*, 21, 219-239.
22. Fox, L. S. & Knight, B. G. (2005). The effects of anxiety on attentional processes in older adults. *Aging and Mental Health*, 9, 585-593.
23. Fry, P. S. (2000). Religious involvement, spirituality, and personal meaning for life existential predictors of psychological wellbeing in community-residing and institutional care adults. *Aging and Mental Health*, 4, 375-387.
24. Ghufuran, M. (2000). Religiosity, insecurity and widowhood: A study of senior citizens. *Indian Psychological Review*, 54, 11-15.
25. Greenglass, E. R., Schwarzer, R., & Taubert, S. (1999). *The Proactive Coping Inventory (PCI): A multidimensional research instrument*. Retrieved from <http://userpage.fu-erlin.de/~health/greenpci.htm>.
26. Haan, N. (1965). Coping and defense mechanisms related to personality inventories. *Journal of Consulting Psychology*, 29, 373-378.

27. Hallis, D. & Slone, M. (1999). Coping strategies and locus of control as mediating variables in the relation between exposure to political life events and psychological adjustment in Israeli children. *International Journal of Stress Management*, 6, 105-123.
28. Jackson, R. (2002). *The global retirement crisis. The Geneva Papers on Risk and Insurance- Issues and Practice*, 27, 486-511.
29. Keyes, C. L. M. (2005). Mental illness and/or mental health? Investigating axioms of the complete state model of health. *Journal of Consulting and Clinical Psychology*, 73, 539-548.
30. Koenig, H. G. (1995). Religion and older men in prison. *International Journal of Geriatric Psychiatry*, 10, 219-230.
31. Koenig, H. G., Cohen, H. J., Bazer, D. G., Meador, K. G., Shelp, F., Goli, V., & DiPasquale, B. (1992). Religious coping and depression in elderly hospitalized medically ill men. *American Journal of Psychiatry*, 149, 1693-1700.
32. Koenig, H. G., Ford, S. M., George, L. K., Blazer, D. G., & Meador, K. G. (1993). Religion and anxiety disorder: An examination and comparison of associations in young, middle-aged, and elderly adults. *Journal of Anxiety Disorders* 7, 321-342.
33. Koenig, H.G. (1997). *Is Religion Good for Your Health?* New York: The Haworth Press.
34. Krause, N. (1991) Stress, religiosity, and abstinence from alcohol. *Psychology and Aging*, 6, 134-144.
35. Lazarus, R.S. (1993). Coping theory and research: Past, present and future. *Psychosomatic Medicine*, 55, 234-247.
36. Levin, J. S. & Chatters, L. M. (1998). Religion, health, and psychological well-being in older adults. *Journal of Aging and Health*, 10, 504-531.
37. Loewenthal, K. M. (1995). *Mental Health and Religion*. London: Chapman and Hall.
38. Moos, R. H., Brennan, P. L., Schutte, K. K., & Moos, B. S. (2005). Older adults' health and changes in late-life drinking patterns. *Aging and Mental Health*, 9, 49-59.
39. Murdocka, M. E., Guarnaccia, C. A., Hayslip, B. Jr., & McKibbin, C. L. (1998). The contribution of small life events to the psychological distress of married and widowed older women. *Journal of Women & Aging*, 10, 3-22.
40. Nelson, P.B. (1989). Ethnic differences in intrinsic/extrinsic religious orientation and depression in the elderly. *Archives of Psychiatric Nursing*, 3, 199-204.
41. Nuevo, R., Wetherell, J. L., Montorio, I., Ruiz, M., & Cabrera, I. (2009). Knowledge about aging and worry in older adults: Testing the mediating role of intolerance of uncertainty. *Aging and Mental Health*, 13, 135-141.
42. O'Conner, B.P. & Vallerand, R.J. (1990). Religious motivation in the elderly: A French-Canadian replication and an extension. *Journal of Social Psychology*, 130, 53-59.
43. Phillips, D. R. & Chan, A. C. M. (2002). National policies on aging and long-term care in the Asia-Pacific: Issues and challenges. In D. R. Phillips & A. C. M. Chan (Eds.), *Aging and long-term care: National policies in the Asia-Pacific* (pp. 122). Singapore: ISEAS and Ottawa: IDRC.

44. Rajan, I. S., Mishra, U. S., & Sarma, P. S. (1999). *India's elderly: Burden or challenge?* New Delhi: Sage Publications and London: Thousand Oaks.
45. Rajan, S. I. (2006). Population ageing and health in India. The Centre for Enquiry into Health and Allied Themes (CEHAT), Mumbai. Retrieved from <http://www.cehat.org/humanrights/rajan.pdf>
46. Reynolds, C. R. & Bigler, E. D. (2001). Professional manual for the Clinical Assessment Scale for Elderly. Odessa, FL: Psychological Assessment Resources.
47. Robb, C., Small, B., & Haley, W. (2008). Gender differences in coping with functional disability in older married couples: The role of personality and social resources. *Aging and Mental Health*, 12, 423-433.
48. Satcher, D. S. (2000). Executive Summary: A report of the Surgeon General on mental health. *Public Health Reports*, 115, 89-101.
49. Schulz, J. H. (1999). Population aging: Economic growth and generational transfers (Labour productivity and saving issues). In R. Cliquet & M. Nizamuddin (Eds.), *Population aging: Challenges for policies and programmes in developed and developing countries* (pp. 123-140). New York: UNFPA and Brussels: CBGS.
50. Thoits, P. A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health and Social Behavior (Extra Issue)*, 53-79.
51. Thompson, R. A. (1991). Emotion regulation and emotional development. *Educational Psychology Review*, 3, 269-307.
52. Thorson, J. A., & Powell, F. C. (1990). Meanings of death and intrinsic religiosity. *Journal of Clinical Psychology*, 46, 379-391.
53. Worthington, E. L., Kurusu, T.A., *et al*, (1996). Empirical research on religion and psychotherapeutic processes and outcomes: A 10-year review and research prospectus. *Psychological Bulletin*, 119, 445-487.
54. Yap, M. T., Thang, L. L. & Traphagan, J. W. (2005). Introduction: aging in Asia-perennial concerns on support and caring for the old. *Journal of Cross-Cultural Gerontology*, 20, 257-267.
55. Yeon, K. C. (2000). Elder care in Korea: The future is now. *Aging International*, 20, 25-37.
56. Zinnbauer, B., Pargament, K., Cole, B., Rye, M., Butter, E., Belavich, T. G., A. B. & Dadar, J. L. (1997). Religion and Spirituality: Unfuzzing the fuzzy. *Journal for the scientific study of religion*, 36, 549-564.

Learning Resources Management Strategies and Academic Achievement of Secondary School Students

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ABSTRACT

The present study was designed to investigate the relationship between learning resources management strategies and academic achievement. And also to find out the differences between high and low achievers, gender differences, and differences between science and humanities students. To conduct the study, 100 students from class IX and class X were selected purposively. The translated Bangla version (Khanam & Ahmed, 2014) of the 'Motivated Strategies for Learning Questionnaire' (Pintrich, Smith, Garcia, & McKeachie, 1991) was administered to collect data. Students' academic achievement was measured by their last academic results. Findings revealed that academic achievement was significantly correlated with time and study environment management, effort management, and seeking help from qualified others. High achievers were differed from low achievers in using time and study environment management, effort management, peer learning, and seeking help from qualified others. No gender differences existed in learning resources management strategies. Science group students were significantly differed from humanities' students in time and study environment management, and peer learning.

Keywords: Time and study environment management, effort management, peer learning, help seeking, academic achievement.

INTRODUCTION

Learning resources management strategies are important component of successful academic learning. Some common and most used learning resource management strategies are – management of learning time, management of study environment, effort management, peer learning, seeking assistance from qualified and significant others etc. Time management involves scheduling, planning, and managing one's study time. It includes not only setting aside blocks of time to study, but the effective use of that study time, setting realistic goals. It varies from an evening studying schedule to weekly and monthly schedule (Pintrich, Smith, Garcia, & McKeachie, 1991). Time management entails that the learner has an awareness of deadlines and the length of time needed for task completion as well as prioritizes learning tasks.

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Study environment management refers to the setting where the student does her class work (Pintrich, et al., 1991). A learner's study environment should be organized, quiet, and relatively free of visual and auditory distractions. Successful learners will be sensitive to the physical learning environment and their time management – making adjustments as necessary. The effort a student expends to reach his or her learning goals is termed effort regulation. Effort management is self-management, and reflects commitment to completing one's study goals, even when there are difficulties and distractions. It is similar to volitional control which is defined as the tendency to maintain focus and effort toward goals despite potential distractions. It enhances the ability of the learner to handle setbacks and failures within the learning process by correctly allocating resources and appropriate effort for more successful learning in the future (Chen, 2002). The effort students expend on a learning task is influenced by the importance, usefulness, and value ascribed to the task. Peer learning refers to students' learning with and from each other as fellow learners without any implied authority to any individual, based on the tenet that students learn a great deal by explaining their ideas to others and by participating in activities in which they can learn from their peers (Boud, 2001). A crucial part of the learning process for adolescents was academic peer support (Eccles, Wigfield, and Schiefele, 1998). Slavin (1996) identifies four theoretical perspectives to explain achievement effects of cooperative peer learning: motivational, social cohesion, cognitive, and developmental perspectives. The motivational perspective focuses on students' goal structures. In this perspective attainment of students' goals are dependent on a group's performance. Groups illustrate social cohesion when students help others learn because of their friendships together and desires for each member to be successful. The cognitive perspective stresses that cooperative peer learning increases students' achievements through interactions that elicit mental processing of information. Under the developmental perspective, students observe modeled behaviors from more advanced students in the group. Another resource management strategy is seeking assistance from qualified and significant others. It can be an adaptive learning strategy that allows a learner to optimize learning by seeking help from local resources such as instructors, peers, tutors, or even additional textbooks. This includes both peers and teachers.

These learning resource management strategies are component of self-regulated learning. These have a direct effect on academic achievement. Academic achievement is the degree of academic learning by the student. It is the chief indicators in evaluating the education. Stegers-Jager, Cohen-Schotanus, & Themmen (2012) found that academic achievement significantly positively correlated with time and study management environment, and effort regulation. Razak & See (2010) found peer learning in enhancing students' academic achievement and facilitating their motivation. Xiaodong & Chung (1999) found academic achievement was positively related to benefits of help-seeking and instrumental help-seeking. Attitudes, value, classroom context and academic achievement had important influence on help-seeking behaviors.

From the above discussion, the aim of the present study was to investigate whether there is any relationship between learning resource management strategies which includes time and study environment management, effort management, peer learning, and seeking assistance from others, and academic achievement of secondary school students. There is dearth of research in this

context in Bangladesh. The present study would provide information about the secondary students' used resource management strategies that facilitate their learning. Such information would also be helpful to teachers and guardians for taking some interventions effort to students for better advancement. This study would also be beneficial to relevant authorities to design curriculum. Finally, this study would be helpful to increase the quality of education. So the main objective of the study was to see the relationship between learning resources management strategies and academic achievement of secondary school students. There were also three other objectives. These were – i) to compare the differences between high achiever and low achiever students, ii) to compare the level of gender differences, iii) to compare the differences between science and humanities students.

METHOD

Participants

The study sample comprised of 100 students from 4 schools of Netrakona District which were selected purposively. From each school total 25 students were selected purposively from class IX and class X. Among 100 respondents, finally we used 92 respondents' responses. Rests were not selected due to missing responses. Of the respondents, 47.8% from class IX and 52.2% from class X, and 22.8% from science group, 6.5% from commerce group, and 70.7% from humanities group. Among the respondents, 52.2% were female and 47.8% male. Amount of study hour (per day) ranged from 2 to 8 hours. High achievers and low achievers were categorized with their results. Those who obtained G.P.A. 1 to G.P.A. 3 were considered as low achievers and those who were obtained G.P.A. 3.01 to G.P.A. 5 were as high achievers.

Instrument used

To collect necessary data for the present study, the translated Bangla version (Khanam & Ahmed, 2014) of the 'Motivated Strategies for Learning Questionnaire' (MSLQ) scale originally developed by Pintrich et al. (1991) was used. The scale comprised of 15 subscales and total 81 items. Among these subscales, 4 subscales [time and study environment (item no.- 35,43,52,65,70,73,77,80) for measuring time and study environment management, effort regulation (item no.- 37,48,60,74) for measuring effort management, peer learning (item no.- 34,45,50), and help seeking (item no.- 40,58,68,75) for measuring seeking assistance from others] were used in the present study. Item no. 37,40,52,60,77,80 were reversely coded. The Cronbach Alpha reliability ranged from .52 (for help seeking) to .93 (for self efficacy for learning and performance). Correlation coefficients between original form of MSLQ and Bangla translation of the MSLQ were ranged from .95 (for extrinsic goal orientation subscale) to .79 (for time and study management subscale). Developers of the scale confirmed the factorial validity. All subscales of the scale were significantly correlated with final grade (as reported by developers). The correlations of subscales of MSLQ with the subscales of the 'Academic Self Regulated Learning Scale' (Magno, 2010) were ranged from 0.10 to 0.34.

Study design; The cross-sectional survey design was used to collect data for the present study.

Procedure

The above instrument was administered on the study sample in classroom situation. They were informed about the purpose and importance of the study and necessary rapport was established with them. Respondents were given written instructions along with the questionnaire. They were asked to read the items of the questionnaire very carefully and express their feelings. They were required to express their opinion concerning each item using a 7 -point scale, ranging from 'strongly disagree' (1) to 'strongly agree' (7). They expressed their opinion by putting tick (✓) mark on the appropriate response boxes those were best expression of their feelings. They were also requested not to omit any item in the questionnaire and also told that there was no right or wrong answer. They were assured that the information collected from them would be strictly confidential and would be used for only research purposes. After completing their task, they were thanked for their cordial cooperation.

RESULTS

From the collected data, to see the correlations among time and study environment, effort regulation, peer learning, help seeking, and academic achievement, the collected data were subjected to the '*Pearson Product Moment Correlation*' analysis. Results appear in Table 1.

Table 1

Correlations among time and study environment (TSE), effort regulation (ER), peer learning (PL), help seeking (HS), and academic achievement (AA)

Variables	AA	TSE	ER	PL
TSE	.244*			
ER	.301**	.566**		
PL	.162	.372**	.175	
HS	.215*	.359**	.323**	.259*

* $p < 0.05$, ** $p < 0.01$

Table 1 indicates that academic achievement was significantly correlated with time and study environment ($r = 0.244$, $p < 0.05$), effort regulation ($r = 0.301$, $p < 0.01$), and help seeking ($r = 0.215$, $p < 0.05$). Time and study environment was significantly correlated with effort regulation ($r = 0.566$, $p < 0.01$), peer learning ($r = 0.372$, $p < 0.01$), and help seeking ($r = 0.359$, $p < 0.01$). Effort regulation significantly correlated with help seeking ($r = 0.323$, $p < 0.01$). Peer learning was significantly correlated with help seeking ($r = 0.259$, $p < 0.05$).

The collected data were subjected to *t test* to see the differences between low achiever and high achiever students in learning resources management strategies. Results appear in Table 2.

Table 2

Mean differences between low achiever and high achiever students in time and study environment (TSE), effort regulation (ER), peer learning (PL), help seeking (HS)

Variables	Low Achiever			High Achiever			Df	t-value
	N	M	SD	N	M	SD		
TSE	32	40.29	5.97	54	44.47	7.09	90	-2.688**
ER	32	18.39	3.75	54	20.59	4.75	90	-2.140*
PL	32	12.43	3.40	54	14.33	3.45	90	-2.404*
HS	32	19.75	3.25	54	21.34	3.83	90	-2.008*

* $p < 0.05$, ** $p < 0.01$

Table 2 indicates that low achiever and high achiever students were significantly differed in time and study management (t test score = -2.688 with df 90, $p < 0.01$), effort regulation (t test score = -2.140 with df 90, $p < 0.05$), peer learning (t test score = -2.404 with df 90, $p < 0.05$), and help seeking (t test score = -2.008 with df 90, $p < 0.05$).

To see the level of gender differences in learning resources management strategies, the collected data were subjected to t test. Results of this test appear in Table 3.

Table 3

Mean differences in time and study environment (TSE), effort regulation (ER), peer learning (PL), help seeking (HS) by gender

Variables	Male			Female			Df	t-value
	N	M	SD	N	M	SD		
TSE	44	41.73	7.83	48	43.33	6.72	90	-1.058
ER	44	19.64	4.24	48	19.85	4.73	90	-.232
PL	44	13.45	3.47	48	13.67	3.67	90	-.284
HS	44	20.61	4.23	48	20.44	3.74	90	.212

Figures in Table 3 indicated that there were no significant mean differences in time and study by gender management, effort regulation, peer learning, and help seeking by gender.

To see the differences between science and humanities students in learning resources management strategies, the collected data were subjected to t test. Results of this test appear in Table 4.

Table 4

Mean differences between science and humanities students in time and study environment (TSE), effort regulation (ER), peer learning (PL), help seeking (HS)

Variables	Science			Humanities			df	t-value
	N	M	SD	N	M	SD		
TSE	21	45.52	6.54	65	42.00	7.19	84	1.993*
ER	21	20.09	4.01	65	20.01	4.53	84	.072
PL	21	15.24	3.03	65	13.18	3.68	84	2.312*
HS	21	20.38	4.58	65	20.69	3.78	84	-.311

* $p < 0.05$

Figures in Table 4 indicate significant mean differences between science and humanities students in time and study management (t test score = 1.993 with df 84, $p < 0.05$) and peer learning (t test score = 2.312 with df 84, $p < 0.05$). Table 4 also indicates there were no significant mean differences in effort regulation, and help seeking.

DISCUSSION

The present study was designed to investigate the relationship between learning resources management strategies and academic achievement of secondary school students. Other objectives of the present were - i) to compare the differences between high achiever and low achiever students, ii) to compare the level of gender differences, iii) to compare the differences between science and humanities students.

Table 1 indicated that academic achievement was significantly positively correlated with time and study environment management, effort management, and seeking assistance from qualified others. This findings is consistent with some previous studies ((Pintrich et al., 1991; Xiaodong & Chung, 1999; Jones, Alexander, & Estell, 2010; Stegers-Jager et al., 2012). By effective time management one set goals and try to accomplish these goals by control over the study environment. So, positive correlation between time and study environment management is desirable. Kaur, Rana, & Kaur (2009) found a significantly positive relationship of home environment components of protectiveness, conformity, reward, and nurturance with self-concept and academic achievement. Effort management is important to academic success because it not only signifies goal commitment, but also regulates the continued use of learning strategies. Meera & Dustin (2013) found effort regulation partially mediated the relationship between self-efficacy and GPA. Good students know when they don't know something and are able to identify someone to provide them with some assistance. Many studies indicated that peer help, peer tutoring, and individual teacher assistance facilitate student academic achievement (Pintrich et al., 1991).

Findings from Table 2 revealed that low achiever students are significantly differed from high achiever students in time and study environment management, effort management, peer learning, and seeking assistance from qualified others. Table 2 indicated students who were high achievers used more time and study environment management, effort management, peer learning, and

seeking assistance from qualified others than low achiever students. These findings also give support the findings from Table 1 where we found that academic achievement was significantly positively correlated with time and study environment management, effort management, and seeking assistance from qualified others.

Figures in Table 3 failed to reveal any significant mean differences in time and study environment management, effort management, peer learning, and seeking assistance from qualified others between boys and girls. One possible reason of no gender differences is that different steps, policies those are taken by Bangladeshi government for more involvement of female students. Now-a-days, boys and girls both receive equal academic opportunities. There is no gender discrimination. So, it is expected to found no significant gender difference in learning resource management strategies.

Table 4 revealed that the students of science group significantly differ from humanities group time and study environment management, and peer learning. Science group students used more time and study environment management, and peer learning than students of humanities group. Curriculum of science group at secondary level more problems oriented. So, do better results in science group, students must use effective time and study environment management. In problematic learning, peer learning is more effective. In peer learning, students will construct their own meaning and understanding of what they need to learn. Essentially, students will be involved in searching for, collecting, analyzing, evaluating, integrating and applying information to complete an assignment or solve a problem. Thus, students will engage themselves intellectually, emotionally and socially in “constructive conversation” and learn by talking and questioning each other’s views and reaching consensus or dissent (Boud, 2001).

Findings of the present study are suggesting that for better academic achievement teachers and guardians may take some psychological interventions for using effective learning resources management strategies.

The present study has some limitations. This study was conducted in one district (Netrakona) out of 64 districts in Bangladesh. As study did not cover wide geographical areas, it is difficult to generalize the findings over whole of Bangladesh. Again, data for the present study were collected from only class IX and class X students. So, it cannot be generalized to the whole secondary students. If future studies will be conducted than it will be better to cover wide geographical areas.

Findings of the present study recommended further researches are needed in several areas with including new variables. For example – i) the effects of various resources management strategies on learning of different types of contents should be examined under experimental conditions; such studies may reveal interactions between strategies and types of contents; ii) new studies should focus on why and to what extent successful students use more some strategies than unsuccessful students; iii) possible links between basic elements of an educational system and students’ use of strategies should be explored; iv) future research should examine what really happens if all students go through strategy training as early as possible in their educational experiences. Finally, more experimental research is needed on the role of learning resources management strategies on both cognitive and affective outcomes in technology-based learning environments. The results of the recommended studies may have great influences and serious implications both for educational researchers and practitioners in Bangladesh.

REFERENCES

1. Boud, D. (2001). 'Introduction: Making the Move to Peer Learning'. In Boud, D., Cohen, Ruth & Sampson, Jane (Ed.). *Peer Learning in Higher Education: Learning From & With Each Other*. London: Kogan Ltd.
2. Chen, C. (2002). Self-regulated learning strategies and achievement in an introduction to information systems course. *Information Technology, Learning, and Performance Journal*, 20(1), 11-23.
3. Eccles, J., Wigfield, A., & Schiefele, U. (1998). Motivation to succeed. In N. Eisenberg (Ed.), W. Damon (Series Ed.) *Handbook of child psychology, Vol 3. Social, emotional, and personality development* (5th ed). New York: Wiley.
4. Jones, M., Alexander, J., & Estell, D. (2010). Homophily among peer groups members'perceived self-regulated learning. *The Journal of Experimental Education*, 78, 378-394.
5. Kaur, J., Rana, J. S., & Kaur, R. (). Home environment and academic achievement as correlates of self-concept among adolescents. *Stud Home Comm Sci*, 3(1), 13-17.
6. Khanam, M, & Ahmed, O. (2014). *The translated Bangla version of the Motivated Strategies for Learning Questionnaire*. Department of Psychology: University of Dhaka.
7. Magno, C. (2010). Assessing academic self-regulated learning among Filipino college students: The factor structure and item fit. *The International Journal of Educational and Psychological Assessment*, 5(1), 61-78.
8. Meera, K., & Dustin, N. (2013). Self-efficacy and academic achievement: why do implicit beliefs, goals, and effort regulation matter? *Learning and Individual Differences*, 25, 67-72.
9. Pintrich, P. R., Smith, D., Garcia, T., & McKeachie, W. (1991). *A manual for the use of the motivated strategies for learning questionnaire (MSLQ)*. Ann Arbor, MI: University of Michigan, National Center for Research to Improve Postsecondary Teaching and Learning.
10. Razak, R. A., & See, Y. C. (2010). Improving academic achievement and motivation through online peer learning. *Procedia Social and Behavioral Sciences*, 9, 358 – 362.
11. Slavin, R. (1996). Research on cooperative learning and achievement: What we know, what we need to know. *Contemporary Educational Psychology*, 21, 43-69.
12. Stegers-Jager, K. M., Cohen-Schotanus, J., & Themmen, A. P. N. (2012). Motivation, learning strategies, participation and medical school performance. *Medical Educaiton*, 46, 678 – 688.
13. Xiaodong, L., & Chung, C. P. (1999). Academic Help-Seeking: Its Relation to Self-Efficacy, Value, Classroom Context, and Academic Achievement. *Acta Psychologica Sinica*, 31(4), 435 – 443.

Emotional Maturity of Pharmaceutical and Engineering Company Employees

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ABSTRACT

Aim of the research is to find out the emotional maturity among pharmaceutical and engineering company employees so investigator selected three groups one is type of organization, second is category of employee and third is education qualification, the groups have 300 peoples. In each group has 150 pharmaceutical employees and other one groups has 150 engineering employees. Scale was use for data collection is personal datasheet and Emotional quotient test scale developed by dilipsingh and nkchadha (2003), 2x2x3 factorial design was used and data were analysis by 'F' test. Result show, There is significant difference between the emotional maturity among pharmaceutical and engineering company employees. The emotional maturity of engineering company employees is better than pharmaceutical company employees. There is no significant difference between the emotional maturity among manager and worker of pharmaceutical and engineering company employees. There is significant difference between the emotional maturity among post-graduate, graduate and diploma of pharmaceutical and engineering company employees. The emotional maturity of post-graduate employee is better than graduate, the diploma holder employee is better than graduate and the post-graduate employee is better than diploma holder employee. There is no significant interaction effect of the emotional maturity among types of organization and category of employees of pharmaceutical and engineering company employees. There is no significant interaction effect of the emotional maturity among types of organization and education qualification of pharmaceutical and engineering company employees. There is significant interaction effect of the emotional maturity among category of employee and education qualification of pharmaceutical and engineering company employees. There is significant interaction effect of the emotional maturity among types of organization, category of employees and education qualification of pharmaceutical and engineering company employees.

Keywords: *Emotional Maturity*

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INTRODUCTION

Etymologically the word 'Emotion' is derived from the Latin word *Emovere* which means to stir up, to excite or to agitate. Emotional maturity implies understanding of oneself, Understanding of the word and understanding of realities of life. Most of our emotional problems arise because we have not understood ourselves and our needs. Whenever there is an emotional situation, it implies an unmet need. By understanding ourselves and connection to our feeling and needs, we can fulfill our needs as well as grow into a mature person. Emotional Maturity implies controlling one's emotions rather than letting our emotions get the better of us. Our emotional maturity depicts our capacity to manage and to check our emotions to evaluate others' emotional state and to persuade their judgment and actions. A person's emotional maturity is very much influenced by his/her relationship history. Emotional intelligence makes an important part of life, together with intellectual and relationship intelligence. Such intelligence can help one to assess emotional maturity and emotional freedom. How well we can tackle any relationship, is a major discernible factor to check our level of emotional maturity.

According to Charles E. Skinner (1949), an emotionally mature person is one who is able to keep a lid on his feelings. He can suffer in silence; he can bid his time in spite of present discomfort. He is not subject to swings in mood, he is not volatile. When he does express emotion, he does so with moderation, decency and in good order.

According to Walter D. Smitson (1974), "Emotional Maturity is a process in which the personality is continuously striving for greater sense of emotional health, both intra-physically and intra-personally."

According to Crow and Crow (1974), "An emotion is an affective experience that accompanies generalized inner adjustment and mental and psychologically stirred up states in an individual and that shows itself in his overt behavior."

According to Coleman (1944), "The most outstanding make of emotional maturity is the ability to bear tension. Besides, an emotionally matured person persists in the capacity of fun and recreation. He enjoys both play and responsible activities and keeps them in proper balance."

According to Fred Mc. Kinney (1960), "The characteristics of an emotionally matured person are heterosexuality, appreciation of attitude and behavior of others tendency to adopt the attitude and habits of others and capacity to delay own responses".

The emotional maturity is best defined as our ability to become sensitive to our environment and the people we interact with. Our perceived emotions allow us the ability to control situations and create solutions. This emotional maturity is also known as having a sense of self.

AIMS OF THE STUDY:

1. To study of emotional maturity among pharmaceutical and engineering company employees.
2. To study of emotional maturity among manager and worker of pharmaceutical and engineering company employees.
3. To study of emotional maturity among post-graduate, graduate and diploma degree holder of pharmaceutical and engineering company employees.
4. To study of the effect of interaction on emotional maturity among type of organization and category of employee of pharmaceutical and engineering company employees.
5. To study of the effect of interaction on emotional maturity among type of organization and education qualification of pharmaceutical and engineering company employees.
6. To study of the effect of interaction on emotional maturity among category of employee and education qualification of pharmaceutical and engineering company employees.
7. To study of the effect of interaction on emotional maturity among type of organization, category of employee and education qualification of pharmaceutical and engineering company employees.

HYPOTHESIS:

1. There is no difference between the emotional maturity among pharmaceutical and engineering company employees.
2. There is no difference between the emotional maturity among manager and worker of pharmaceutical and engineering company employees.
3. There is no difference between the emotional maturity among post-graduate, graduate and diploma degree holder of pharmaceutical and engineering company employees.
4. There is no interaction effect of the emotional maturity among types of organization and category of employees of pharmaceutical and engineering company employees.
5. There is no interaction effect of the emotional maturity among types of organization and education qualification of pharmaceutical and engineering company employees.
6. There is no interaction effect of the emotional maturity among category of employee and education qualification of pharmaceutical and engineering company employees.
7. There is no interaction effect of the emotional maturity among types of organization, category of employees and education qualification of pharmaceutical and engineering company employees.

METHODOLOGY:

Research design:

This research will be adopted 2×2×3 factorial design as well as 1st is type of organization (Pharmaceutical and Engineering), 2nd is type of employees (Manager and Worker) 3rd is education qualification (Post-Graduate, Graduate and Diploma).

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Samples	B1			B2			Total no. of samples
	C1	C2	C3	C1	C2	C3	
A1	25	25	25	25	25	25	150
A2	25	25	25	25	25	25	150
Total no. of samples	50	50	50	50	50	50	300

1. A1- Means pharmaceutical company.
2. A2- Means engineering company.
3. B1- Means Manager.
4. B2- Means Worker.
5. C1- Means post-graduate education qualification.
6. C2- Means graduate education qualification.
7. C3- Means diploma education qualification.

SAMPLE:

The sample comprised of total 300 employees of pharmaceutical and engineering companies. The sample selected randomly from the various pharmaceutical and engineering companies.

TOOLS USED:

The following tools were used in the present study:

- **Personal Datasheet:**

A Personal data sheet developed by investigator will used to collect information about types of organization, category of employee and education qualification.

- **Emotional quotient test:**

This test standardize and developed by dilipsingh and nkchadha (2003), the test contains 22 items. The present EQ test measures three psychological dimensions such as emotional sensitivity, emotional maturity and emotional competency.

RELIABILITY:

For the present scale, test-retest and split-half reliabilities were computed. To find the 'retest reliability' a sample of 150 (males and females) was taken. The retest reliability for the test was found to be 0.94. The 'split-half' is another method of estimating reliability coefficient. It measures internal consistency of test scores. The split-half reliability in the case of odd-even items was 0.89 and for the first half and second half was 0.91. Both reliability coefficients are significantly higher which indicate that the present EQ scale enjoys high reliability.

VALIDITY:

The test, designed by danielgoleman, and the present scale was administered to 60 subjects. The scores obtained from both tests were correlated to determine the validity index. The validity was found to be 0.92, which indicates that the present EQ scale is valid. Further, the present scale was co-related with the emotional intelligence test developed by chadha (2001) on 60 subjects to determine the validity index. The validity was found to be 0.78 which indicates that the present test is valid.

STATISTICAL ANALYSIS:

Following statistical analysis will be used for analyzing the data.

F-ANOVA

RESULT AND DISCUSSION:

Emotional maturity with reference type of organization, category of employees and education qualification

The main objective was to study pharmaceutical and engineering organization employees having category manager and worker also having educational qualification of post-graduate, graduate and diploma degree differ in overall emotional maturity. In this context, 7 null hypotheses (no.1to7) were constructed. For this purpose 2x2x3 factorial design was framed. To examine these null hypothesis statistical techniques of F- ANOVA was used. The results obtained are presented in table 1, 2, and 3.

Table no. 1 (N=300)

Means and SDs of overall emotional maturity with reference type of organization, category of employees and education qualification.

Independent variable					
Pharmaceutical	Manager	Mean	Post- Graduate	Graduate	Diploma
		SD	110.96	93.44	93.60
		N	10.00	25.26	18.68
	Worker	Mean	25	25	25
		SD	94.40	91.20	106.44
		N	12.61	16.09	24.39
	Worker	Mean	25	25	25

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		N	25	25	25
Engineering	Manager	Mean	116.40	112.60	116.80
		SD	11.41	11.38	7.89
		N	25	25	25
	Worker	Mean	114.58	112.40	112.40
		SD	10.42	12.17	11.00
		N	25	25	25

Table no. 2 (N=300)

Difference between mean score of overall emotional maturity with reference type of organization, category of employees and education qualification.

Independent variable	N	Mean (M)	Difference between mean
Pharmaceutical(A1)	150	98.25	16.02(A1 x A2)
Engineering(A2)	150	114.27	
Manager/supervisor(B1)	150	107.21	1.9(B1 x B2)
Worker(B2)	150	105.31	
Post-Graduate(C1)	100	109.05	6.64(C1 x C2)
Graduate(C2)	100	102.41	4.9(C2 x C3)
Diploma(C3)	100	107.31	1.74(C1 x C3)

Table no.4.3n (N=300)

ANOVA summary of overall emotional maturity with reference type of organization, category of employees and education qualification.

Source of variance	Sum of squares	df	Mean sum of squares	F	Sign. Level
Type of organization	19248.03	1	19248.03	82.65	0.01*
Category of employee	270.75	1	270.75	1.16	NS

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Education qualification	2370.91	2	1185.45	5.09	0.01*
Type of organization x Category of employee	0.75	1	0.75	0.003	NS
Type of organization x Education qualification	669.44	2	334.72	1.44	NS
Category of employee x Education qualification	2103.92	2	1051.96	4.52	0.05**
Type of organization x Category of employee x Education qualification	3215.12	2	1607.56	6.90	0.01*
SSW (Error)	67074.32	288	232.90		
SST	94953.24	299			
*P>0.01, **P>0.05, NS= Not Significant					

Emotional maturity with reference to type of organization:-

When F test was applied to check the impact of emotional maturity on type of organization, significant F value was found. The F value (table no.3) is 82.65 which are statistically significant on level 0.01. Table no. 2 reveals that the mean scores of emotional maturity of pharmaceutical company employees is 98.25 and engineering company employees is 114.27 respectively and the mean difference between two is 16.02 which is very high and not negligible. Hence the null hypothesis 1 was rejected and it was concluded that there was significant impact of emotional maturity on pharmaceutical and engineering company employees.

Emotional maturity with reference to category of employee :-

When F test was applied to check the impact of emotional maturity on Category of Employee, no significant F value was found. The F value (table no.3) is 1.16 which is statistically not significant. Table no. 2 reveals that the mean score of emotional maturity of manager and is 107.21 and worker is 105.31 as respectively and the mean difference between two is 1.09 which is very negligible. Hence, the null hypothesis 2 was maintained and it was conclude that there was not any significant impact of emotional maturity on manager and worker.

Emotional maturity with reference to education qualification:-

When F test was applied to check the impact of emotional maturity on education qualification, significant F value was found. The F value (table no.3) is 5.09 which are statistically significant on level 0.01. Table no. 2 reveals that the mean scores of emotional maturity of post-graduate is 109.05, graduate is 102.41 and diploma is 107.31 respectively and the difference between two is 6.64(C1 x C2), 4.9(C2 x C3) and 1.74(C1 x C3) which is very high and not negligible. Hence the null hypothesis 3 was rejected and it was concluded that there was significant impact of emotional maturity on post-graduate, graduate and diploma.

Emotional maturity with reference to interaction effect of type of organization and category of employee:-

When F test was applied to check the interaction effect of emotional maturity on type of organization and category of employee, no significant interaction effect was found. The F value (table no 3) is 0.003 which is statistically not significant. Hence the null hypothesis 4 was maintained and it was conclude that there was no significant interaction effect of emotional maturity on type of organization and category of employee.

Emotional maturity with reference to interaction effect of type of organization and education qualification:-

When F test was applied to check the interaction effect of emotional maturity on type of organization and education qualification, no significant interaction effect was found. The F value (table no 3) is 1.44 which is statistically not significant. Hence the null hypothesis 5 was maintained and it was conclude that there was no significant interaction effect of emotional maturity on type of organization and education qualification.

Emotional maturity with reference to interaction effect of category of employee and education qualification:-

When F test was applied to check the interaction effect of emotional maturity on category of employee and education qualification, significant F value was found. The F value (table no 3) is 4.52 which are statistically significant on level 0.05. Hence the null hypothesis 6 was rejected and it was concluded that there was significant interaction effect of emotional maturity on category of employee and education qualification.

Emotional maturity with reference to interaction effect of type of organization, category of employee and education qualification:-

When F test was applied to check the interaction effect of emotional maturity on type of organization, category of employee and education qualification, significant F value was found. The F value (table no 3) is 6.90 which are statistically significant on level 0.01. Hence the null hypothesis 7 was rejected and it was concluded that there was significant interaction effect of emotional maturity on type of organization, category of employee and education qualification.

CONCLUSION:

1. There is significant difference between the emotional maturity among pharmaceutical and engineering company employees. The emotional maturity of engineering company employees is better than pharmaceutical company employees.
2. There is no significant difference between the emotional maturity among manager and worker of pharmaceutical and engineering company employees.

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3. There is significant difference between the emotional maturity among post-graduate, graduate and diploma of pharmaceutical and engineering company employees. The emotional maturity of post-graduate employee is better than graduate, the diploma holder employee is better than graduate and the post-graduate employee is better than diploma holder employee.
4. There is no significant interaction effect of the emotional maturity among types of organization and category of employees of pharmaceutical and engineering company employees.
5. There is no significant interaction effect of the emotional maturity among types of organization and education qualification of pharmaceutical and engineering company employees.
6. There is significant interaction effect of the emotional maturity among category of employee and education qualification of pharmaceutical and engineering company employees.
7. There is significant interaction effect of the emotional maturity among types of organization, category of employees and education qualification of pharmaceutical and engineering company employees.

REFERENCES:

1. Joshi,R. and Tomar, S.,(2010).A study of optimism and Pessimism on emotional Maturity, depression and coping Strategies among adolescent, international research journal, vol. I issue-3&4
2. Singh, R., (2011). Emotional maturity among senior secondary school students in relation to their self-esteem, home environment and mental health, Ph.D. Thesis Education, Published maharshidaya anand university, rohtak, hariyana.
3. Srilatha, B.,(2012).Emotional maturity, social maturity and moral judgment of the student teachers of guntur district, ph.d. Thesis education, published Acharya Nagarjuna University, nagarjuna nagar, guntur, a.p.
4. Suneetha, H. and Vijayalaxmi, A. A., (2007). Self- Concept, Emotional Maturity and Achievement Motivation of the Adolescent Children of Employed Mothers and Homemakers, Journal of the Indian Academy of Applied Psychology, January 2007, Vol. 33, No.1, 103-110.

WEBSITE:

1. <http://shodhganga.inflibnet.ac.in/>
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A study of Multidimensional Social Support System among School Teachers

Ruchi Dhyani*

ABSTRACT

Life is an interconnection of relation fabric. The quality of life depends on what kind of relation fabric we use. Every individual has different kinds and forms of social support in life. Social support helps us to realize that there is someone who cares and loves us and with whom we can share our sorrow and suffering that will give us comfort, peace of mind & give strength to overcome from the difficulties of life. This study, conducted on 64 school teachers from Patiala city out of which 36 male and 28 female teachers. The chi square method & mean is used for the statistical purposes. The results indicated that there is no significant relation between biographical factors (Gender, Age, and marital status) and subscales of social support.

Keywords: Social support viz. Family, Friends, significant others.

INTRODUCTION

Life is a reflection of relations. Relations relate us with each other's. The basic purpose of having relations in life is to get support system. Every individual has a support system comprised different kinds of sources from where they get the strength and courage to fight in the difficult situations in their life. Social Support as a general feeling of being adequately supported or cared for by others. Social support refers to the experience being valued, respected, cared about, and loved by others who are present in one's life (Gurung, 2006). According to Boyd (2002) social support refers to a multidimensional construct which includes emotional and informational, sharing, physical and instrumental help, and attitude transmission. House, Umberson, and Landis (1988) proposed that social support is an interpersonal transaction involving emotional concern (e.g., liking, love, empathy), instrumental aid (e.g., goods or services), information (cues regarding the environment), and/or appraisal (information relevant to self-evaluation). Cutrona and Russell (1987) identified six functions of social support: guidance, reliable alliance, attachment, reassurance of worth, social integration and opportunity for nurturance. Barrera, Sandier, and Ramsay (1981) have proposed four different types of support that peers and family may provide including guidance and feedback (e.g., advice and instruction), non-directive support (e.g., trust and intimacy), positive social interactions (e.g., spending time with friends-

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- and family), and tangible assistance (e.g., shelter and money). Rittenour and Martin (2008) explained several ways to identify social support: “social support, as it is labelled in the field of communication, involves empathy, sympathy, concern, compassion, validation of feelings, and encouragement towards another”. Social supports for teachers may be used in multiple ways in which to alleviate job stress. Due to both individual and environmental characteristics of teachers’ have been linked to stress, social supports may be used as a way in which to buffer and/or prevent these characteristics (Cohen & Wills, 1985). Khan & Achour (2011) conducted a study on 70 Administrative staff of the University of Malaya, Kuala Lumpur with the aim to examine religiosity and social support as coping strategies and their influence on reducing job stress and employees’ well-being of the administrative staff of Malaysian learning institutions. The determinants of job stress included under this research were workload pressure, homework interface, and performance pressure. Researchers used a set of questionnaires to collect data. The results revealed that coping strategies positively related to social support and religiosity and negatively related to job strain. Finding also revealed that religiosity significantly related to social support and coping strategies negatively related to job strain. Social support has been understood to be an important contributor to health and psychological wellbeing in the general population (Cobb, 1976). Daalen et. al. (2005) examined the sources of social support as predictors of health, psychological well-being and life satisfaction among Dutch male and female dual earner. Results revealed that men receive more social support from spouse while women receive more from relatives and friends. Both received equal support from supervisors. No gender difference exists on the effect of social support. Yildirim (2008) found there is a negative relationship between the dimensions of burnout and social support. According to Vaux (1988), even though many findings suggest that gender is an irrelevant factor in the relationship between social support and well-being, gender differences may become salient when comparing sources of social support. There is a limited and confounding research on gender differences in regards to social support networks.

METHODOLOGIES AND ANALYSIS

Objectives

1. To study the social support system among the teachers.
2. To find out whether there is any association between teacher biographical factors and the manifestation social support.

Hypotheses

1. There is no relationship between teachers' biographical factors and the manifestations of social support.

Methodology

Descriptive study method was used. The sample of 64 school teachers was collected from Patiala city. The sample comprised 36 male and 28 female teachers.

RESEARCH

Multidimensional Scale of Perceived Social Support (MSPSS; Zimet, Dahlem, Zimet, & Farley, 1988). Multidimensional scale of perceived social support scale is developed by Zimet, Dahlem, Zimet and Farley, 1988. This is a self-administered test. The scale is comprised of 3 groups depending on the source of support from each group consisting of 4 items. These are family (3,4,8,11) friends (6,7,9,12) and a significant other (1,2,5,10). Each item is rated on a 7 point Likert scale ranging from 1 (very strongly disagree) to 7 (very strongly agree). The sum of 4 items under each sub scale gives the sub scale scores while the sum of all sub scale scores gives the overall scale scores.

ADMINISTRATION & SCORING OF THE MSPSS

This is a self-administered test in which respondents were requested to read the instructions carefully and then respond to the questions. It was emphasized that no item should be ignored. The respondents whose scores between 12 – 48 showing low levels of perceived social support, whose scores between 49 – 68 must have moderate level of perceived social support and whose scoring ranges between 69 – 84 must have high levels of perceived social support.

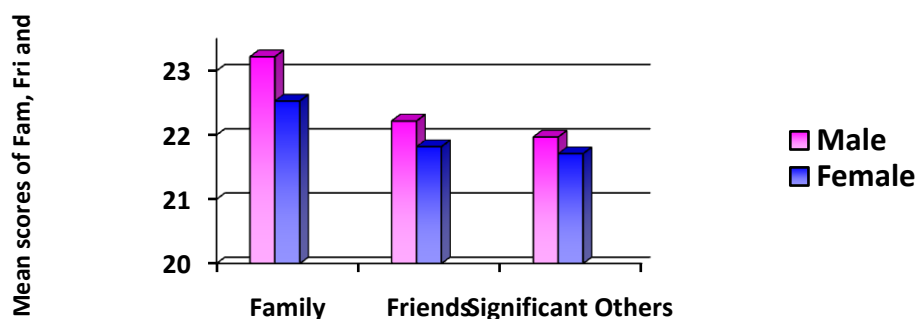
STATISTICAL TECHNIQUES

Mean and Chi square test were used for data analysis.

RESULTS & DISCUSSION

Table1. Mean scores of social support viz. Family (Fam), Friends(Fri) and Significant others(SO)

Variables	Family	Friends	Significant others
Male	23.22	22.22	21.97
Female	22.53	21.82	21.71



The above graph shows that Means of scores of social support viz. Family, Friends and Significant others on gender basis.

Table 2.1 Relationship between the variable of gender and total score of family

Gender	Low	Medium	High	Total
Male	3	9	24	36
Female	3	9	16	28
Total	6	18	40	64

$\chi^2=0.61$ $df=2$ $p>0.05$

The P-value, for the chi-square test $P(\chi^2>0.61) = 0.737$ at $df=2$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of gender and the total score of family.

Table 2.2 Relationship between the variable of age and total score of family

Age	Low	Medium	High	Total
20-29	2	6	13	21
30-39	4	8	23	35
40-<	0	4	4	8
Total	6	18	40	64

$\chi^2=2.87$ $df=4$ $p>0.05$

The P-value, for the chi-square test $P(\chi^2>2.87) = 0.578$ at $df=4$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of age and total score of family.

Table 2.3 Relationship between the variable of marital status and total scores of family

Marital status	Low	Medium	High	Total
Single	4	5	15	24
Married	2	13	25	40
Total	6	18	40	64

$\chi^2=2.90$ $df=2$ $p>0.05$

The P-value, for the chi-square test is $P(\chi^2>2.90) = 0.234$ at $df=2$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of marital status and total score of family.

Table 3.1 Relationship between the variable of gender and total score of friends

Gender	Low	Medium	High	Total
Male	3	15	18	36
Female	5	10	13	28
Total	8	25	31	64

$\chi^2=1.32$ $df=2$ $p>0.05$

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The P-value, for the chi-square test is $P(\chi^2 > 1.32) = 0.515$ at $df=2$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of gender and total score of friends.

Table 3.2 Relationship between the variable of age and total score of friends

Age	Low	Medium	High	Total
20-29	2	6	13	21
30-39	5	18	12	35
40-<	1	1	6	8
Total	8	25	31	64

$\chi^2 = 7.04$ $df=4$ $p > 0.05$

The P-value, for the chi-square test $P(\chi^2 > 7.04) = 0.133$ at $df=4$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of age and total score of friends.

Table 3.3 Relationship between the variable of marital status and total score of friends

Marital Status	Low	Medium	High	Total
Single	4	8	12	24
Married	4	17	19	40
Total	8	25	31	64

$\chi^2 = 0.87$ $df=2$ $p > 0.05$

The P-value, for the chi-square test $P(\chi^2 > 0.87) = 0.645$ at $df=2$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of marital status and total score of friends.

Table 4.1 Relationship between the variable of gender and total score of significant others

Gender	Low	Medium	High	Total
Male	4	14	18	36
Female	2	14	12	28
Total	6	28	30	64

$\chi^2 = 0.88$ $df=2$ $p > 0.05$

The P-value, for the chi-square test $P(\chi^2 > 0.88) = 0.644$ at $df=2$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of gender and the total score of significant others.

Table 4.2 Relationship between the variable of age and total score of significant others

Age	Low	Medium	High	Total
20-29	3	5	13	21
30-39	2	21	12	35
40-<	1	2	5	8
Total	6	28	30	64

$\chi^2=8.40$ $df=4$ $p>0.05$

The P-value, for the chi-square test $P(\chi^2>8.40) = 0.077$ at $df=4$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of age and total score of significant others.

Table 4.3 Relationship between the variable of marital status and total score of significant others

Marital status	Low	Medium	High	Total
Single	4	10	10	24
Married	2	18	20	40
Total	6	28	30	64

$\chi^2=2.44$ $df=2$ $p>0.05$

The P-value, for the chi-square test $P(\chi^2>2.44) = 0.295$ at $df=2$, is greater than the significance level (0.05), we can accept the null hypothesis. Thus, the test shows no significant relationship between the variable of marital status and total score of significant others. The overall discussion can be summed up there is no significant relation between the biographical factors and the subscales of social support.

CONCLUSION

Social support helps to overcome from stressful situations and acts as a life saver during the critical period of life. Social support comes in life with different forms and also provides different kind of comforts & fight with stressful conditions. This study was conducted on school teachers to analyze their social support system. The results of this study indicated that there is no significant difference in social support and biographical factors.

REFERENCES

1. Barrera, M., Sandler, I., & Ramsay, T (1981). Preliminary development of a scale of social support. Studies on college students. *American Journal of Community Psychology*, 9 (4), 435-447.
2. Boyd, B. A. (2002). Examining the relationship between stress and lack of social support in mothers of children with autism. *Focus on Autism & Other Developmental Disabilities*, 17 (4), 208-215.
3. Cobb, S. (1976). Social support as a moderator of life stress. *Psychosomatic Medicine*, 38 (5), 300-314.
4. Cohen, S. & Wills, T. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98 (2), 310-357.
5. Cutrona, C. E., & Russell, D. W. (1987). The provisions of social support and adaptation to stress. In W. H. Jones & D. Perlman (Eds.), *Advances in personal relationships* (pp. 37-67). Greenwich, CT: JAI Press. Dynamics of Responses to Stress. *Journal of Applied Psychology*, 91, 1037
6. Daalen, V. G., Sanders, K., & Willemsen, M. T. (2005). Sources of social support as predictors of health, psychological well-being and life satisfaction among Dutch male and female dual earner. *Journal of women and health*, 41(2), 43-62.
7. Gurung, R. A. R (2006). *Health Psychology: A Cultural Approach*. Belmont CA: Thomson Wadsworth.
8. House, J. S., Umberson, D., & Landis, K.R. (1988). Structures and processes of social support. *Annual Review of Sociology*, 14, 293-318.
9. Khan, A., & Achour, M. (2011). Social support and Religiosity as Coping Strategies for Reducing Job Stress. *International Conference on Business and Economics Research*, 1, 291-293.
10. Rittenour, C., & Martin, M. (2008). Convergent Validity of the Communication Based Emotional Support Scale. *Communication Studies*, 59, 235-241.
11. Vaux, A. (1988). *Social support*. New York: Prager.
12. Yildirm, I. (2008). Relationship between burnout, sources of social support & socio demographic variables. *Social behavior and personality*, 36 (5), 603-616.

Understanding Learners' Perspective on Creative Music Making

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ABSTRACT

Creative music making is one of the least studied aspects of music education. This may be partly due to our limited knowledge of the creative process. There is a need to explore and understand the creative process of music making by taking perspective of music students within a particular socio cultural context. Present study aimed to explore and analyze the creative process of music making (making variations in *rāga*'s contents and/or compositions) by considering the vocal students' perspective in an institutional setup. 10 vocal students (2 from Diploma, 4 from B. Mus. and 4 from M. Mus.) from two prestigious institutions of UP were interviewed (4 in-person and 6 telephonically). Thematic analysis revealed three themes – *causal forces*, *conscious music making*, and *natural process of music making*. Findings suggest that the particular psychological state, occasion or situation which inspires music students to visualize and forces them to create new music. Two creative processes of music making identified (i.e., *conscious* and *natural*) follow different pathways.

Keywords: *Hindustani music; creative process; sociocultural context; rāga*

INTRODUCTION

Running (2008) noted that a large body of research regarding creativity and music education has focused more on measuring musical creativity than on creative process. The creativity literature has primarily relied on the 4P model of Rhodes (1961) which embraces four independent factors—*person*, *process*, *product* and *press*. Every *person* has creative potential but has different ways of expressing it. There is a constellation of other relevant factors, including motivation, personality, traits, skills and knowledge for creativity to manifest. *Process* refers to stages or manner in which creativity unfolds. *Product* is the output of the creative process (music performance) and *press* refers to the context within which creativity manifests. Panda (2011) has reviewed Indian studies on creativity along the four major aspects: person, place, process, and product, though she did not deal with musical creativity per say.

Many of the creativity research usually decontextualise creative people, processes and products (Lubart, 1999); whereas, contextualises advocate that context have certain affect on creativity. Context refers to the set of facts or circumstances that surround a situation or event. It may assimilate in itself the culture, personal and social factors, and the works and practices of a culture. Bhawuk (2003) proposed that cultures moderate the channelling of individual abilities toward certain creative behaviors.

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Research has evinced the importance of personal and societal factors while examining a specific case of creative process (Newman, 2008). According to Indian perspective, creativity depends on the culture of the country (*desha*), the historical era in which one lives (*kāla*), on the efforts required (*śrama*) and, lastly, on one's innate character (*guna*) that is probably inherited from past lives (Kakar and Kakar 2007).

“Creativity” is not a useful term because it is so misused (See Webster, 2002). For many years, Webster maintained that “creative thinking” is really a term that has its base in what most of us understand to be “creativity.” What creativity in music really is: *the engagement of the mind in the active, structured process of thinking in sound for the purpose of producing some product that is new for the creator?* This study takes forward the assumption made by Webster (2002). Webster conceptualises creative thinking as a dynamic process of alternation between convergent and divergent thinking, moving in stages over time, enabled by certain skills (both innate and learned), and by certain conditions, all resulting in a final product. Creative thinking is not always a mysterious process that is based on divine inspiration or reserved only for those who are labelled as “gifted” or “genius.” Creative thinking also occurs at various levels, from the spontaneous songs of the very young child to the products of the greatest minds in music.

Odena (2002) aptly explained two opposing views among people regarding the general understanding of creativity in music: the *systematic* and the *romantic*. The *systemic view* involves a good deal of effort and persistence (conscious efforts), where creative work is seen as a rational everyday affair. This is in opposition to the *romantic* view of creativity characterized by irrationality, mystery and unconsciousness (natural). However, a relevant idea for developing creativity in music is that a period of focused effort is required in order to have an in depth understanding of music-related issue.

The term ‘music making’ as used in this research has been considered synonymous to ‘making composition’. Barrett (2003) described music making as using “the basic properties of sound, such as length, volume and timbre or tone colour” and refining or combining these “to create musical meaning” (p. 65). Hickey (2002) noted that creative music making is one of the least studied aspects of music education. This may be partly due to our limited knowledge of the creative process (Hickey, 2001; Sloboda, 1985). Be ghetto and Kaufman (2007) and Kaufman, Baer, and Cole (2007) are the few who made endeavours in this direction by looking at self-perceptions of creative individuals. How do students and experts view their own creativity? There is a need to explore and understand the creative process of music making by taking perspective of music students within a particular sociocultural context.

Numerous available biographies and autobiographies of Indian musicians are also lacking the process contents. In fact one can find few biographies and autobiographies (like *Bhimsen Joshi: A Passion for Music* by Majumdar, 2004) talking about the learning/training process to some extent but they rarely talked about creative processes. Even if it has been mentioned somewhere, it seems like introducing the terms rather defining or explaining. The present study, following this line of thinking has focused on creative process of music making by taking the perspective of music (vocal) students belonging to Hindustani music tradition.

In Hindustani music system – which is based on melody-single notes played in a given order (horizontal system) (Weber, 1976, p. 297) – where the grammar of melody and rhythm is fixed, the skill and ingenuity of the musician lies in his improvisation and creativity, especially in

evocation of the mood and *rasa* of the particular *rāga*. A *rāga* is the combination of different notes that contained in an octave, with *varnas* that pleases the listeners (Bandopadhyay, 1995, p. 55). The greatest strength of Hindustani music is that it enjoys the freedom to experiment in both theme and practice (Mansukhani, 1982). The objective for the singer is to express himself through music making and to share with the listener all phases of the creative process, much as an idea developed in extempore speech (Dhar, 2005, p. 221). Dhar further pointed that Hindustani tradition offers extraordinary freedom to musicians to express their being. They can freely explore the areas in between the rigid 'notes' of the keyboard and free from objective time (p. 223).

Hindustani music tradition acknowledges two kind of creation - 'improvisation' and 'compositions.' A composition means a *bandīśa*, which is a definite arrangement of words into notes and rhythm. On the other hand, improvisation, which takes place during practice, refers to the other parts of a *rāga* performance, such as *ālāpa*, *tāna* etc. In composition, changes (in relation to *ālāpa*, *bandīśa*, *baṛhata*, *layakārī*, *bolbanāo* and *tāna*) are done meditatively, worked out in practice (Meer, 1980).

MODELS OF CREATIVE PROCESS

More than two decades ago, Keating (1980) said that there is no clear, unambiguous and widely accepted definition of the creative process. Lau (2006) wondered that this view continues to be held even today. He said that because of the multifaceted nature of creative processes, various strands have been used to explore the concept. Plsek (1996) noted that some experts dismissed the notion that creativity could be described as a sequence of steps in a model. For example, Gestalt philosophers like Wertheimer (1945) asserted that the process of creative thinking as an integrated line of thought that does not lend itself to the segmentation implied by the steps of a model. In a similar vein, Vinacke (1953) was adamant that creative thinking in the arts does not follow a model. Nevertheless, Plsek (1996) concluded that while such views are strongly held, they are in minority.

From a psychological perspective, Arasteh and Arasteh (1976) regarded creative processes as including imagination, fantasy, originality, divergent thinking, inventiveness, intuition, ingenuity, innovation, venturesomeness, exploration, curiosity, discovery learning and problem solving. Wright (2003) described an equally complex list of creative processes, which include fluency, flexibility, elaboration, transformation, problem solving, objectivity, and selectivity, and aesthetic and practical standards.

In his book *Creativity: The Magical Synthesis*, Silvano Arieti (1976) catalogued eight models of the creative thinking process that were proposed during the period 1908 to 1964. Additional models have been proposed since. One of the earliest models of the creative process is attributed to Graham Wallas. Wallas (1926) proposed that creative thinking proceeds through four phases: *preparation* (definition of issue, observation, and study), *incubation* (laying the issue aside for a time), *illumination* (the moment when a new idea finally emerges) and *verification* (checking it out). Torrance (1988) asserts that Wallas' model is the basis for most of the creative thinking training programs available today. The implied theory behind Wallas' model -- that creative thinking is a subconscious process that cannot be directed, and that creative and analytical thinking are complementary -- is reflected to varying degrees in other models of creativity.

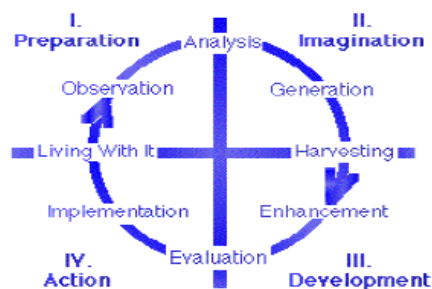
Understanding Learners' Perspective on Creative Music Making

Rossman (1931) examined the creative process via questionnaires completed by 710 inventors and expanded Wallas' original four steps to seven. These steps are - (a) observation of a need or difficulty; (b) analysis of the need; (c) a survey of all available information; (d) a formulation of all objective solutions; (e) a critical analysis of these solutions for their advantages and disadvantages; (f) the birth of the new idea -- the invention; and (g) experimentation to test out the most promising solution, and the selection and perfection of the final embodiment. Note that while Rossman still shrouded the "birth of the new idea" in mystery, his steps leading up to and following this moment of illumination were clearly analytical.

Alex Osborn (1953), the developer of brainstorming, embraced a similar theory of balance between analysis and imagination in his seven-step model for creative thinking. These steps are *orientation* (pointing up the problem), *preparation* (gathering pertinent data), *analysis* (breaking down the relevant material), *ideation* (piling up alternatives by way of ideas), *incubation* (letting up, to invite illumination), *synthesis* (putting the pieces together), and *evaluation* (judging the resulting ideas).

Barron (1988) placed great emphasis on subconscious and chance processes in his four – phase "psychic creation model": *conception* (in a prepared mind), *gestation* (time, intricately coordinated), *parturition* (suffering to be born, emergence to light), and *bringing up the baby* (further period of development). The tone of Barron's model supports the popular view of creativity as a mysterious process involving subconscious thoughts beyond the control of the creator.

Plsek (1996) proposed the Directed Creativity Cycle; a synthesis model of creative thinking that combines the concepts behind the various models proposed over the last 80+ years, some of them have been outlined previously. Directed creativity simply means that we make purposeful mental movements to avoid the pitfalls associated with our cognitive mechanisms at each step of this process of searching for novel and useful ideas.



Upadhyay (2013) in his doctoral work found that there are two general processes of making variations – one is through conscious efforts and second is *Natural*, which has been also discussed by Meer (1980). Conscious process is the process when one intentionally makes an effort to create some music or variations in any *rāga*. Meer (1980) calls them the meditated changes, worked out in practice, which

constitute a *lapsus memoriae*. On the other hand, *Natural* process is the process that does not have conscious steps. Subconscious changes or variations emerge naturally when a musician practices, a teacher teaches or a performer performs.

Jan Mittelstaedt, NCTM in his paper titled "*Steps in the Creative Process*" described the process of making of a composition. Mittelstaedt (1995) said that the evolution of a musical composition may be a lengthy or brief process and for some composers, ideas, which do not need revision, seem to flow quickly and freely. Mittelstaedt believed that composers who write freely and easily like Mozart (he wrote three symphonies in one summer, 1788) and those who, like Beethoven, compose with effort go through similar steps in their creative process. These steps

include having a reason for the composition, getting an idea, planning the composition, writing the details, and critically evaluating and editing the final product. Mittelstaedt (1995) further noted that although a person with a knowledge of music can follow the outlined steps and create a composition, the piece will be dull and uninteresting if *inspiration* is absent.

Continued review of definitions of creativeness in both the general and music literature reveals five common elements: (1) a problem solving context, (2) convergent and divergent thinking skills, (3) stages in the thinking process, (4) some aspect of novelty, and (5) usefulness of the resulting product. Regardless of the discipline, most experts agree that creative thinking is driven by a problem and a need for its solution. In the arts, the problem is more a “force” in the creator that inspires or drives the creative spirit. In music, the response to this force is embodied in (a) composition, (b) performance/improvisation and (c) listening and analysis. (Webster, 2002)

Against this backdrop, present research has tried to propose tentative models of the creative processes of music making (conscious and natural) in the light of models proposed by Wallas and Osborn. The idea was not to test these models but to take their help in analyzing the successive steps followed by music students to create their own music. I personally convinced with what Plsek (1996) asked us to notice that these models clearly support the notion that innovation is a step beyond the simple generation of creative ideas. The action phase of the model makes it clear that creative ideas have value only when they are implemented in the real world (context).

METHOD

Present study aimed to explore and analyze the creative process of music making (making variations in *rāga*'s contents and/or compositions) by considering the vocal students' perspective in an institutional setup. The Hindustani music in major North Indian government institutions is being taught through three back-to-back courses namely Diploma (3 years), Graduation (3 years), and Post Graduation (2 years). 10 vocal students (2 from Diploma, 4 from B. Mus. and 4 from M. Mus.) from two prestigious institutions of UP were interviewed (4 in-person and 6 telephonically). These students were among the participants of my doctoral work on which a questionnaire was administered. This questionnaire consisted questions related to creative music making. I had selected these students based on their response to the items of creative music making and on their desire to elaborate upon the creative processes in-person.

All the participants had given their contact numbers. I directly called and talked to them through mobile phone. Firstly, they were briefed about the context and purpose for calling. After their consent for interviews, they were asked to give time as per their comfort. With the second talk, interviews were started. On an average interviews were completed in 30 minutes. Students were asked to *recall their creative experiences of making a composition or making of variations in a rāga's content*. Further, they were asked *whether these variations emerged naturally, or through conscious efforts and what was the process*. Data obtained were recorded, transcribed and thematically analyzed. Analysis revealed three themes – *causal forces*, *conscious music making*, and *natural process of music making*. Emerged themes have been discussed in the following paragraphs.

RESULTS AND DISCUSSION

Causal Forces – These students recalled several factors that inspire creative thinking and which gets its expression through one's mother tongue. Anuragi shared:

Words come in mother tongue. It automatically pumps out through emotions, which may be yielded by immediate environment or people surrounded.

Namita clearly stated that she is normally guided by her mood. The particular psychological state provides a favourable atmosphere in which new music emerges. Namita gave her own example when she got heart attack and created her own music. Creativity may also be triggered by a particular situation or an occasion. Urvashi clarified further:

...in a particular mood, like when I am very sad, as I told. If I am a vocal student then some Dhun (tune) will come to my mind. Even when I am crying. Once I will stop, it becomes apparent.

Creativity manifests itself while practicing. Deepika indicated about *riāz*:

Suppose you are singing a Rāga or Bāṇḍiśa and one Boltāna or Dhun emerges. It happens during riāz and even while sitting and singing without any purpose. Sometimes it comes up suddenly and sometimes it requires effort.

Deepika affirmed to the extent that *riāz* is the only source for creation. Avantika had the view that creativity becomes visible when one is talented, does rigorous *riāz*, and is blessed by his Guru. She expressed:

Guru is the gist of everything. He shows the path, but we should follow it all the way.

Urvashi emphasised upon the mutual learning between teacher and students. She explained this idea further –

My teacher motivates me to create. She says that sometimes I also learn from my students. Any art of the world is nothing but learning and teaching. No artists are perfect. For few things he gets command, becomes bit better and above than others, but it does not mean that he knows everything. Whether he is a Guru or a student, in fact Guru is also like a student. He helps his student to reach at the level of himself. Then they reciprocate the same.

Besides these factors, Deepika added that *sometimes when teachers ask us to sing, something new comes out*. Avantika also shared - *...in my examination, I had to make notations of given Bāṇḍiśa.*

Conscious Process of Music Making – Deepika shared her view that through conscious effort better things can be created. Conscious process is more rigorous and easy to articulate. Avantika, Ankita, and Pooram had the same view that one must be thorough with the *shāstra* of a *rāga*. Avantika said that although she never created her own genuine composition, but she made variations in notes of a particular *rāga*. She explicated the process:

...I have the lyrics. I read it carefully to understand the meaning. Accordingly, I select a rāga that suits to the meaning of the lyrics. Then I focus on those combinations of notes, if

they would be used, they might give impressions of other rāga. Then after, I practice the main combinations of notes and try to get myself absorbed into them. I start with lower octave. I take any two or three notes like S, R, and G and try to make variations. Gradually I develop upon those variations that are new and sweet. Then I get feedback of my Guru whether it has maintained the nature of rāga.

Avantika further shared her view that continuously thinking upon the learned *rāga* and humming is also a kind of *riāz*. Unconsciously it is being processed in your mind. Ankita provided steps for making variations –

1. Concentrate on the notes to be used in a *rāga*,
2. Then on the notes not to be used,
3. Focus on the notes for *nyās*, *vādi* and *samvādi*,
4. Internalize the nature and method of the *rāga*,
5. Repeat the main combinations of notes, and
6. Then start creating *tānas*. Get feedback.

Moreover, Pooram said that we get feedback to improve further. We make *rāga*-based composition so that we can immerse ourselves in its emotion.

Findings suggest that music students start with a lyric that either has been selected by their own or has been offered by someone. Subsequently they try to understand the meaning of the words. They start rhyming. Through rhyming and reading the lyric repeatedly, they try to identify the intended meaning and emotion of the words. Then they look for the appropriate *rāga* and the minute details (as concentrating on the notes to be used or not to be used in a *rāga*, focusing on the notes for *nyās*, *vādi* and *samvādi*, and internalizing is the nature and method of that *rāga*).

At this stage, music students write multiple combinations of *rāga*, and set their composition on an appropriate *tāla*. Afterward, musicians repeat the alternatives many times or sometime they just need to wait. Suddenly an original piece of composition emerges. It happens only through these repetitions. Then musicians put these pieces together: notes, *tānas*, etc. and complete the process of making composition. Lastly, they evaluate it critically. They look for critical comments from their colleagues, teachers/*Guru* and so on.

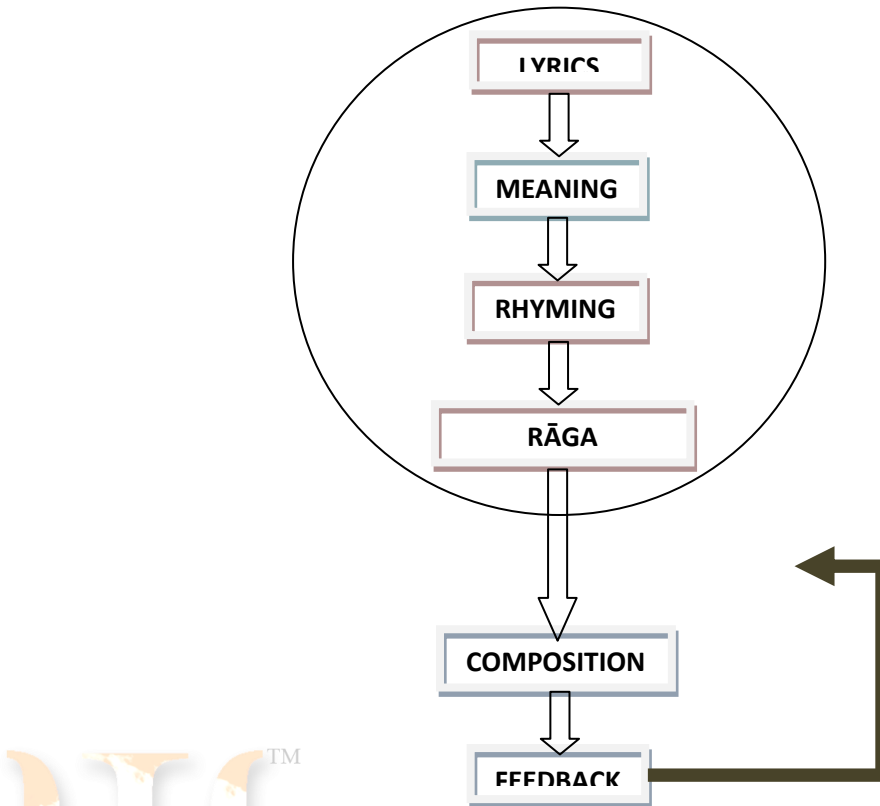


Figure 1: Conscious Music Making

In Figure 1, I have further tried to understand the process graphically. First four stages, from *lyrics to rāga selection*, reflect stages of preparation and exploration that provides a fertile ground for creativity to manifest. At this stage, *repetition of composed notes*, suddenly a new, genuine and appropriate tune emerges. During last two stages, *composition* and *feedback*, a creative composition takes its final shape that has gone through several modifications, syntheses, and verifications. What I could understand that the conscious process of music making broadly follows the stages propounded by Wallas (1926) and it closely goes with the Osborn's (1953) Seven-Step Model for creative thinking.

Natural Process of Music Making – A common notion could be observed through the responses of the participants that creation emerges naturally through these stimulating factors. All have shared that the process in which music emerges from some unknown sources may not be conveyed explicitly. However, few have tried. For natural creation, most of the participants shared this belief that one must be talented. As Pooram asserted:

If someone has inborn talent, he can create his own music. He does not require any training.

Therefore, as Anuragi suggested – *do not wait for something special to appear. It happens naturally, while you are cycling, or doing riāz (Deepika)*. One must be vigilant when it pops out. So, what should one do? Anuragi said:

I always keep a pen and a notebook. Whenever some new Bañdiśa or Dhun comes in my mind, I note it down. Otherwise, it will be disappeared.

Anuragi had this view that one must have complete knowledge of the particular *rāga*. Deepika averred further - *I do not go for riāz with this thinking that I have to create something new. It emerges all of a sudden.* She said that she starts by singing a *rāga* and meditating over the notes of that particular *rāga*. Urvashi further explained:

...as we are vocal students, every time there is something which goes on in our mind like our own Bhajan, or any rāga. While singing, some new combinations of notes appear which seems pleasant. You start liking your dhun. In the way, some new things emerge. I do not try it consciously. It comes naturally.

Namita recalled the process in detail -

Firstly dhun (tune) comes in mind. Consequently, Bol (words) emerges by itself. Then I set it with Tāla (rhythm) to make it more effective. Mood must be according to the rāga. If you don't have the knowledge of rāga, you can make it in any regional language. However, if it is rāga based then it will be more effective. It may also leave its effect on non-professionals. Because, notes used in a particular rāga, are not just notes. They jointly produce a Rasa.

Findings reveal that the process of *natural* egression initially follows different pathway. It starts with initiation through immediate surroundings and one's mood, which yields some emotions. And automatically *dhun* (tune) comes into the mind followed by words. Then it needs planning for the selection of appropriate words, *tāla*, *ālāp*, *tāna*, etc. Next step is to synthesize – putting them together. Then, musicians try to evaluate their composition through several repetitions of the composed piece and feedback. The process ends with writing the final composition.

Figure 2 depicts the natural or spontaneous process of music making. *Dhun* and words pop up in a particular mood that might be evoked through several stimulating factors as stated above. Then it is to be set on any *tāla*. Consequently, it is shaped into a complete composition. Now it is to be opened for feedback from friends, teachers, or other experts. The process ends with the final comprehensible and original composition.

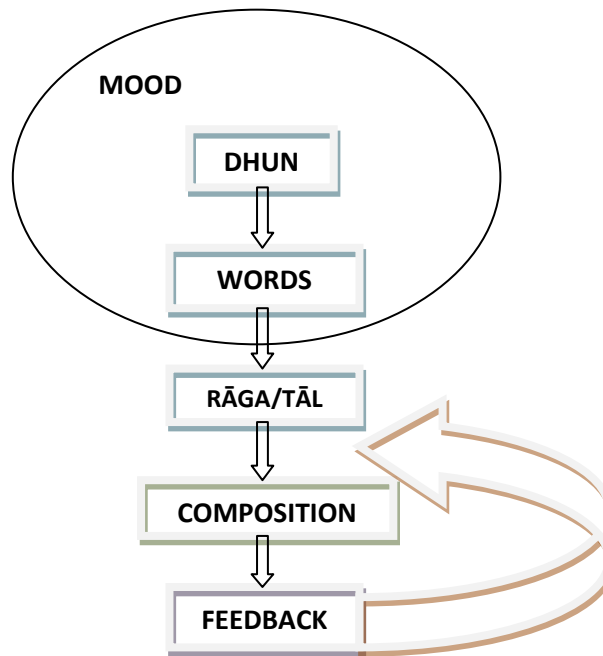


Figure 2: Natural Process of Music Making

CONCLUDING COMMENTS

Inspiration and visualization or imaginations were found very crucial for creativity. It may be the particular psychological state, occasion or situation when musicians get inspiration and visualize. Both creative processes follow different initial steps. Moreover, this contextual approach to understand creative music making confirms the most extensive model proposed by Webster (2002). According to this model a musician starts with particular product intension (e.g., composition or improvisation) that drive the process itself and the resulting products come from creative thinking. The process has certain effects of musicians' enabling skills (e.g., aptitude, conceptual understanding, etc.) and enabling personal as well as sociocultural conditions.

Upadhyay (2013) concludes that many of the musicians when they want to compose they prefer evening time and the fixed place of *riāz*. The time, the place and the immediate surroundings inspire them to visualize. They think over the *rāga* repeatedly and contemplates whether it appropriately suits the song they have and, what could be more in tune with the mood of the composition. Mittelstaedt (1995) rightly pointed that the composition or creation of the piece will be dull and uninteresting if inspiration is absent.

Present work was a rare endeavour in the area of creative music making in Hindustani music tradition that captured the students' perspective. It opened a new vista for future research in this direction. As this study has had confined to only music students (vocal music) belonging to Hindustani music tradition, future studies might analyse the professionals' perspective as well in order to develop a complete model of creative music making. Students and professionals of different areas of music (i.e., vocal, dance and instruments) could be considered at the same time to further strengthen the model. Future research in the area of creativity in music might also be designed along the lines of comparative analysis: a comparative analysis between two groups: one representing Carnatic music tradition and the other Hindustani music. Case studies, focus-group interviews, and classroom observations might have yielded findings that are more robust.

REFERENCES

1. Arasteh, A. R., & Arasteh, J. D. (1976). *Creativity and human development: An interpretative and annotated bibliography*. New York: Schenkman.
2. Arieti, S. 1976. *Creativity. The Magic Synthesis*. New York: Basic Books.
3. Bandopadhyay, S. (1977/1995). *The origin of Rāga*. New Delhi: Munshiram Manoharlal Publishers Pvt. Ltd.
4. Barrett, M. (2003). Musical children, musical lives, musical worlds. In S. Wright (Ed.), *Children, meaning-making and the arts* (pp. 63-85). Frenchs Forest, NSW: Person Prentice Hall.
5. Barron, F. (1988). Putting creativity to work. In R.J. Sternberg (Ed.), *The Nature of Creativity*. Cambridge, England: Cambridge University Press.
6. Beghetto, R. A., & Kaufman, J. C. (2007). Toward a broader conception of creativity: A case for mini-c creativity. *Psychology of Aesthetics, Creativity, and the Arts*, 1, 73–79.
7. Bhawuk, D. P. S. (2003). Culture's influence on creativity: The case of Indian spirituality. *International Journal of Intercultural Relations*, 27, 1-22.
8. Dhar, S. (2005). *Raga 'n Josh: Stories from a Musical Life*. UK: Hachette
9. Hickey, M. (2001). An application of Amabile's consensual assessment technique for rating the creativity of children's musical compositions, *Journal of Research in Music Education*, 49 (3), 234–244.
10. Hickey, M. (2002). *Connecting perspectives on music composition for children*. Paper presented at the 25th Biennial Conference in Music Education, 19 August, Bergen, Norway.
11. Kakar, S., & Kakar, K. (2007). *The Indians: Portrait of a people*. New Delhi: Penguin Books.
12. Kaufman, J.C., Lee, J., Baer, J., & Lee, S. (2007). Captions, consistency, creativity, and the consensual assessment techniques: New evidence of validity. *Thinking Skills and Creativity*, 2, 96-106.
13. Keating, D. P. (1980). Four faces of creativity. *Gifted Child Quarterly*, 24, 56-61.
14. Lau, M. W. C. (2006). *Strategies kindergarten teachers use to enhance children's musical creativity: Case studies of three Hong Kong teachers*. Unpublished PhD thesis, Center for Learning Innovation, Queensland university of Technology, Hong Kong.
15. Lubart, T. I. (1999). Creativity across cultures. In R. J. Sternberg (Ed.), *Handbook of creativity* (pp. 339-350). Cambridge: Cambridge University Press.
16. Majumdar, A. (2004). *Bhimsen Joshi: A passion for music*. Delhi: Rupa publications India Pvt. Ltd.
17. Mansukhani, G. S. (1982). *Indian classical music and Sikh kirtan*. New York.
18. Meer, W. V. D. (1980). *Hindustani music in the 20th century*. The Hague: Martinus Nijhoff Publishers.
19. Mittelstaedt, J. (1995). *Steps in the creative process*. OMTA.

20. Newman, T. U. (2008). *The creative process of music composition: A qualitative self-study*. Unpublished dissertation, New York university, New York.
21. Odena, O. (2002, September). Using videotaped extracts of lessons during interviews to facilitate the eliciting of teachers' thinking: An example with music schoolteachers' views of creativity. Paper presented at the European Educational Research Association Annual Conference, University of Lisbon, Portugal. Retrieved November 2007, from <http://www.leeds.ac.uk/educol/documents/00002206.htm>
22. Osborn, A. (1953). *Applied Imagination*. New York: Charles Scribner.
23. Panda, M. (2011). Cultural Construction of Creativity: Dualism and Beyond. In M. Cornelissen, G. Mishra, & S. Verma (Eds.), *Psychology: The Indian tradition*. New Delhi: Pearson
24. Plsek, P. E. (1996). *Working Paper: Models for the Creative Process*. Retrieved November 2010 from <http://www.directedcreativity.com/pages/WPMModels.html>
25. Rhodes, M. (1961). An analysis of creativity. *Phi Delta Kappa*, 42, 305-310
26. Rossman, J. (1931). *The Psychology of the Inventor*. Washington DC: Inventor's Publishing.
27. Running, D. G. (2008). Creativity research in music education: A review (1980-2005). *Application of Research in Music Education* 27(1), 41-48.
28. Sloboda, J. (1985). *The musical mind, the cognitive psychology of music*. Oxford: Oxford University Press.
29. Torrance, E. P. (1988). The nature of creativity as manifest in its testing. In Sternberg, R. J. (Ed.), *The nature of creativity*. Cambridge, England: Cambridge Univ. Press.
30. Upadhyay, D. K. (2013). *Psychosocial dispositions of creative musicians*. Unpublished PhD thesis, Center for Advanced Studies, Department of Psychology, University of Allahabad, India.
31. Vinacke, WE (1953). *The psychology of thinking*. New York: McGraw Hill.
32. Wallas, G. (1926). *The art of thought*. London: C. A. Watts.
33. Weber, A. (1976). *Lectures on Indian literature*. Retrieved 11 April 2009 from http://www.michaelwheelerstudios.com/uploads/7/1/4/6/7146403/indian_classical_music__sikh_kirtan.pdf
34. Webster, P. (2002). Creative thinking in music: Advancing a model. In T Sullivan and L Willingham (Eds.), *Creativity and music education*, (pp. 16–33). Canadian Music Educators' Association, Edmonton, AB.
35. Wertheimer, M (1945). *Productive Thinking*. New York: Harper.
36. Wright, S. (2003). *The arts, young children and learning*. Bostan, MA: Allyn and Bacon.

Journey from Infertile Frame to Fertile Living

Ramya S*

ABSTRACT

Longing for children and the heartbreak of futility have been a part and parcel of life since the beginning of mankind. The paper gives an in depth understanding of infertility as a medical, psychological and social condition with suitable theoretical frameworks. The paper identifies the key role of infertility counselor, a mental health professional trained in reproductive medicine, in an individual/couple journey from the beginning of treatment to beyond treatment. Infertility counselor contributes by providing effective therapeutic interventions to improve patient well-being and response to treatment and giving different perspectives for understanding the issue from cultural, gender and societal point of view. Finally, the paper discusses importance of the transition from childlessness to child-free and the role of infertility counselor in facilitating it.

Keywords: *Infertility Treatment, Infertility counseling, Theoretical frameworks, Psychological interventions, Transition to child-free*

INTRODUCTION

Infertility is defined as an inability to conceive after 12 months of unprotected sexual intercourse. Primary infertility refers to the failure to conceive by a couple who has never conceived, while secondary infertility refers to the failure to conceive by a couple who had previously conceived (Sharon, Linda, 2006, pg 20). The World Health Organization (WHO) estimates that 60 to 80 million couples worldwide currently suffer from infertility (WHO, 2004). In a country like India pivoting varied traditions and cultures where womanhood is considered to be complete only by childbearing, the national prevalence of infertility is between 7 and 10 percent and prevalence of primary and secondary infertility are 3 and 8 percent respectively (WHO). According to Multi-centric study conducted by WHO, primary and secondary infertility rates are 3 and 8 percent respectively. Though there is wide variance in incidence rates of infertility among different countries, the toll it takes on individuals emotional and social well-being results in significant and unique psychosocial consequences.

Interpreting Infertility

There are various models that interpret infertility and its causal factors. In this paper medical model, psychological models and social construct theory are discussed particularly.

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Medical Model

Infertility is commonly identified as an illness, mostly a chronic illness, since it is long term, is shrouded with uncertainty and can dominate and intrude one's life. The medical model of infertility attributes pathology to biological and molecular processes (Mc Daniel, Hapworth and Doherty 1992). In approximately 90% of the cases referred for infertility treatment, a physical reason for the infertility can be diagnosed (Greil 1991, Monarch 1993).

The major causes of female infertility include (1) failure to ovulate, (2) structural or functional abnormalities of the Fallopian tubes, (3) endometriosis or adhesions in the pelvis of the woman that interfere with capture of the egg by the Fallopian tube, (4) poor timing or technique of intercourse, (5) infections of the reproductive tract, (6) immunological barriers to fertilization or implantation, and (7) an abnormal uterine lining that may interfere with implantation of the embryo.

The major causes of male infertility (pathological causes) can be broadly classified as pre-testicular, testicular and post-testicular. Some pre-testicular causes of infertility are hypo- and hyper gonadotropic hypogonadism, Kallman syndrome and medications or genetic abnormalities that affect the hypothalamic-pituitary-gonadal (HPG) axis. Common testicular causes of infertility are varicocele, cryptorchidism, testicular injury, testicular cancer and congenital abnormalities. Examples of post testicular causes of infertility are congenital bilateral absence of the vas deferens (CBVAD), erectile dysfunction, Young's Syndrome, nerve injury and abnormal coital practices.

Full Psychogenic Infertility Model and Psychological consequence model

Both of these models contrast each other. According to Full Psychogenic Infertility Model all cases of sterility and infertility are basically caused by psychological problems or mechanisms. Psychological disturbances of various kinds are perceived as generating infertility. Physical obstructions were considered as secondary causes. For example, Folds and Folds (1979) described tubal occlusion as generated by spasms or temporary occlusions that, in turn had a psychogenic origin. Where as in Psychological consequence model causality is reversed. It is assumed that infertility -rather than being caused by psychological factors- may instead lead to psychological problems, such as depression, stress, anxiety, etc., A study by Klonoff- Cohen revealed a strong evidence supporting the notion that psychological factor such as stress effects pregnancy outcomes where in they found subjects who expressed lowest baseline of distress were 93% more likely to have a live birth when compared to subjects who reported highest baseline level of distress levels. However some studies ended with opposite results. Though these causal factors are contradictory and debatable, the aspect psychological counseling remains important. In a study (Domar et al; Boston IVF, Harvard Medical School) 43% of couples who

underwent counseling, achieved pregnancy compared to 16.7% in the control group, which shows the effectiveness of psychological interventions in the outcome of infertility treatment.

SOCIAL CONSTRUCT THEORY

From the prospective of social construct theory, infertility is not a static condition with predictable psychosocial outcomes, but rather a dynamic, social conditioned process that changes individuals struggle to deal with and to make meaning of their unique experience of infertility. Often the process of constructing a meaning about infertility begins once a couple suspects a problem, even before medical treatment is sought (Greil, Leitko, Porter, 1988). This theory is critical in understanding how different people interpret infertility. It addresses cultural, religious, and environmental factors (e.g., natural or man-made disasters such as hurricanes or terrorist attacks) that can and do intensify or somehow influence the infertility experience for individuals and couples.

Remedial measures to Infertility

Almost every society has culturally approved solutions to infertility – social, spiritual, and medical –Divorce, polygamy, and extramarital affairs remain various forms of adoption and fostering, as they have long been, social solutions to infertility. Since antiquity, the appeal of religious faith and the power of belief in spirits and gods as a remedy for infertility can be found in all cultures. Various forms of medical approaches which the older generation has tried and gone become the foundations for new innovations spurting in the science arena. For example, the tales that suggest that the ancients were familiar with the ‘idea’ of artificial insemination, one story states that “God Shiva once spurted semen when he saw Vishnu in the form of the celestial enchantress Mohini. Sages collected this and gave it to the wind-god Vayu, who poured it into the ‘ear’ (a common mythical metaphor for the womb) of Anjani, a monkey, who gave birth to Hanuman, the monkey-god. Devoid of the mythical aura, one might say that the tale refers to the practice of artificial insemination: semen is transferred to the womb without sexual intercourse). And the other story in the Bhagvata Purana, which suggests the practice of surrogate motherhood. Kans, the wicked king of Mathura, had imprisoned his sister Devaki and her husband Vasudeva because oracles had informed him that her child would be his killer. Every time she delivered a child, he smashed its head on the floor. He killed six children. When the seventh child was conceived, the gods intervened. They summoned the goddess Yogamaya and had her transfer the fetus from the womb of Devaki to the womb of Rohini (Vasudeva’s other wife who lived with her sister Yashoda across the river Yamuna, in the village of cowherds at Gokul). Thus the child conceived in one womb was incubated in and delivered through another womb.”

And these days with the advancement in technology that opens horizons infertility issues are systematically dealt beginning from screening to a wide variety of treatment options that are available with inventions in pharmacology. For women, few screening techniques employed are

Hormone testing (Anti Mullerian Hormone AMH, follicle stimulating hormone FSH, Luteinizing hormone LH), Sonographic parameters for Ovulation testing (like Antral follicle count, Ovarian Volume and ovarian Vascular Flow), uterus evaluation methods like Hysterosalpingography (HSG), Ultrasound, Sonohysterography, and Hysteroscopy, endometrial biopsy (which tests the lining of the uterus), tubal patency tests like HSG, Saline infusion Sonography, Laparoscopic Chromotubation and Fluoroscopic Tubal Cannulation, Pap smear to check for signs of infection, postcoital test to identify cervical causes, and Special X-ray tests. For men, Sperm testing through semen analysis and Testicular biopsy (surgical extraction of sperm). And procedural techniques employed to treat Infertility are like IUI, IVF and ICSI. Intra-Uterine Insemination (IUI) with or without controlled ovarian hyper stimulation (COH) is a cost effective fertility treatment that involves placing a number of washed sperm directly into the uterus. The rationale of IUI is to reduce the effect of factors such as vaginal acidity and cervical mucus hostility and to benefit from the deposition of a bolus of concentrated motile morphologically normal sperms as close as possible to oocytes. In vitro fertilization (IVF) refers to a procedure where the woman's eggs are retrieved by planned and timed trigger and fertilized with the man's sperm outside the body, in a laboratory and Intra Cytoplasmic Sperm Injection (ICSI) is an advanced fertilization method where a single sperm is injected directly into the egg using a fine glass needle. The embryos, thus formed are then placed back into the uterus to achieve a pregnancy (Embryo Transfer ET) Today, India amidst moral, ethical and religious constraints, has become the hub of Fertility Clinics providing flexible treatment with different options for couples seeking infertility treatment ranging from IUI (own sample or donor sample), IVF self cycle to third party reproduction like IVF donor oocyte Cycle, donor sperm cycle, donor embryo cycle, and surrogacy. However, this flexibility is bound by its own constraints like age, finance, success rate, etc along with unidentifiable psychogenic factors which might increase the uncertainty of the treatment.

Theoretical frameworks that convey life beyond the treatment boundary

Although the world encountered a great deal of changes from civilizations, societal structures to advancement in science and technology since the beginning of creation, childbearing remain fundamentally important though the value and reasons for having children may have changed.

According to **family systems theory**, the family life cycle framework defines a series of stages with expectable timelines that most people imagine as their predictable life course. Successful passage through family life cycle stages depends on the effectiveness of developmentally appropriate negotiations of tasks and stressors. Carter and McGoldrick delineated six stages of the American family life cycle, a model that acknowledges the confluence of situational, developmental, and family-of-origin (historical) stressors. The stages and their tasks are: 1. Unattached young adult, 2. Married couple, 3. Family with young children 4. Family with adolescents 5. Parents launching children 6. Family in later life. While Parenthood enables couples moving forward through the predictable stages of the family life cycle childlessness

stops the whole family system dynamics. In short, childless couples trapped in the ‘couple stage’ of the family life cycle can feel lost in a painful ‘no man’s land’ of quasi-adulthood, on the fringe of family flux, where individual, couple, and family roles are ill defined and/or uncomfortable while at the same time feeling responsible for preventing other family members and/or the family system from moving forward. According to R. Matthews and A. Matthews the transition to nonparenthood is as important and demanding a transition for families and individuals as the more traditional transition to parenthood. The childless couple must redefine the meaning of family to include a marital dyad without children. Couples must alter their life, goals, and personal identities and all members of the family system must adapt and adjust as they rework family boundaries these are challenging tasks for individuals, couples, and families.

Erickson identified eight stages of life critical in human psychosocial development. While they parallel family development, the focus of Erickson’s stages is on individual development and tasks that balance the negative and positives in each developmental stage. The stages most pertinent to involuntarily childless men and women are: young adulthood: Intimacy versus isolation; adulthood: Generativity versus self-absorption; and senescence: Integrity versus disgust. As Erickson pointed out, failure to move through this developmental stage leads to a “pervading sense of stagnation and interpersonal impoverishment” potentially impacting healthy adjustment later in life and successful achievement of developmental tasks contributes to happiness and success in later tasks. Developmental tasks are based on physical maturation; cultural pressures; and privileges and include the aspirations and values of the individual. Erickson’s generative task of midlife is an excellent example of how the successful accomplishment of a developmental task need not be restricted to reproduction (as is very often the socially and culturally defined norm). Generativity can also expand beyond childbearing to include a multitude of creative endeavors; mentoring possibilities; and nurturing opportunities, allowing the mature adult to guide and influence the next generation.

Ireland suggested a variation of object-relations and Lacanian theory to better understand the woman who is not a mother. “Unlike the male, who must reject his early identification with mother and shift his identification to father, the daughter’s identity evolves through a path of continual relatedness; she will never have to completely relinquish her earliest maternal identification.” Consequently, the desire or need for recreating the mother–child bond is intimately tied to a woman’s identity formation and maturation. Unfortunately, because the childless woman identifies with her mother, it is difficult for her to see herself in the roles of competency and independence beyond the role of motherhood. Simply put: All mothers are women, but not all women are mothers. The mother who models a multifaceted personality extending beyond her ‘good’ or ‘bad’ mothering offers her daughter more opportunity to identify with and be influenced by her mother’s personality and creative expression of identity. Motherhood is no longer the one and only defining component of a woman. Ireland contended that personal identity based on an expanded view of femaleness better enables a woman to develop her full potential

The danger of childlessness due to voluntary delay, or ongoing, but unsuccessful medical treatment, lies in the possibility of never making the decision to live without children. Endless treatment options can keep the wound open and delay healing. Year after year, grief persists and festers. Fulfillment and happiness become as elusive as parenthood. The focus of a man or woman's identity becomes a sense of not having, not belonging, and not sharing. The cost of unresolved grief can be the additional losses of relationships, marriage, jobs, career, and other life plans. There is also a substantial risk of depression, anxiety, and other mental and physical health difficulties.

As it's clearly evident that Infertility is not just a medical condition, but also a social and emotional condition, it's crucial to adopt infertility counseling as a part of infertility treatment to provide a holistic approach. Infertility counseling as an emerging specialty within the mental health professions, has gained recognition and respect for its professional contributions through patient care, research, and education as well as for the identification of the need for expert care and treatment of this unique population in conjunction with complex medical treatment. Infertility counselor refers to any mental health professional who has special training in reproductive medicine alongside competency in assessments and therapeutic interventions. The Infertility counselor evaluates, diagnoses, and treats psychological disorders that emerge as couple confronts infertility. Since infertility is an emotional turmoil for the couple from the time of initial diagnosis to treatment to post infertility, and nature of treatment itself being a mental block adding on to the stress, infertility counselor takes charge of addressing these issues by providing patient education, an arena for facilitating decision making, a forum for discussing ethical and cultural issues related to treatment, and emotional follow-up when the treatment results in a pregnancy and especially, when it does not.

JOURNEY FROM CHILDLESSNESS TO BE CHILD-FREE

“Choosing to be child-free after infertility is not giving up hope, it is finding hope of a good life again, only this time without children.” -Carter and Carter

Opting to live child-free could be a result of fruitless journey through varied infertility treatments discussed above or adaptation for couples when childlessness is the only alternative. Child-free is a hopeful word used to describe the positive potential in life? To live child-free is not resigning oneself to a life without children, rather a conscious, deliberate decision to define oneself with a new identity, set new goals and the ability to invest renewed energies into work, family, and hobbies. To live child-free is a choice requiring clarity of thoughts, feelings, and communication before becoming acceptable to both partners. This reengineering of self and family is an active process in which living child-free is a way to fulfill the goals of parenthood in other positive, constructive ways. People with the desire to nurture and love should be encouraged to find ways to do this without having children. The move to a child-free life is a creative adaptation from

sorrow, pain, and loss.

However this major transition is difficult if the couple has not been able to come to an agreement on being child-free and in such cases infertility counseling recommended. Through various means of therapeutic intervention infertility counselors can help individuals and couples process their losses and then, in time, guide decision making and assist their transformation of identity in pursuit of new life meaning. Ultimately, the goal is to help the client consciously accept and find fulfillment and safety in their new and unexpected life journey. In this, confronting loss is the first step wherein one must face the loss of the dreamed-of child; the loss of whatever part of one's identity was wrapped up in those dreams; and the loss of a destiny that one always assumed would be achieved. Shapiro contended that: "Couples can't rein in control over their emotions and private lives until they cease their quest for a baby." Deciding to stop treatment can be more devastating than being on a treatment treadmill with the variety of treatment options available today. Medical intervention locks the couple into a cycle of hope, followed by the crushing despair of failure. They often feel they cannot give up and think that if they keep trying, eventually something will work. Only the honest and realistic acceptance of their circumstances allows their hope and energy to return. By **facilitating the grief and loss**, as the mourning process is over, psychological well being is restored out of denials and emotional paralysis.

Facilitating decision making is the second step in moving towards being child-free where in the counselor plays a role in clearing barriers of communication gap and helping one to express himself/herself in an effective way. Compromise is the main goal, but may not be possible if there are difference of opinions between couple where in one is ready to accept new changes and the other desires to be a parent, also if childlessness is culturally unacceptable. By giving the opportunity to verbalize their feelings and helping them appreciate each other's views and by renewing their commitment to each other, possible solutions can emerge. Generally, client(s) and infertility counselor agree to a time-limited contract with clearly defined goals. Typically, goals will be met within two to ten sessions. After years of riding on emotional roller coaster, possibilities of feeling helpless or denial of the situation might peep in, if left unworked they have the potential of leading to clinical depression. Using **solution-focused therapy** or a **cognitive-behavioral framework**, infertility counselors can help clients reconnect with their feelings in a safe and supportive environment using various strategies like Self-instructions that include Distraction, Imagery, Motivational self-talk and further leading to the development of adaptive coping strategies for minimizing negative or self-defeating thoughts and changing maladaptive beliefs. Another therapy, which is found effective is **Rational-Emotive Behaviour Therapy (REBT)** by Albert Ellis proposes a 'biopsychosocial' explanation of causation – i.e. That a combination of biological, psychological, and social factors are involved in the way humans feel and act. 'ABC' theory of personality that illustrates the role of cognition is central to REBT Theory and Practice. In this framework 'A' represents an actual event or experience, and the person's 'inferences' or interpretations as to what is happening like "I am not able to reproduce". 'B' represents the 'evaluative' beliefs that follow from these inferences "I am not

complete”. ‘C’ represents the Consequences, emotions and behaviours that follow from those evaluative beliefs like “Victimizing isolating one”. A does not give rise to C, instead, B largely causes C. Ellis adds D and E to ABC: The therapist must dispute (D) the irrational beliefs (whole aspect of you is not identified only by childbearing, there are many aspects that attributes to life), in order for the client to ultimately enjoy the positive psychological effects (E) of rational beliefs (Feeling good about oneself there by rechanneling the energy in a constructive way to other aspects of life). Developing Insights about ones irrational beliefs and working on eliminating it and Unconditional Acceptance of Self, Others and Life are key techniques for major transition to occur.

The basic goal of using REBT in Infertility set up is to assist clients in minimizing emotional disturbances and self defeating thoughts and behaviours, and by the end of session become more self actualized so that they can lead a happier existence. The therapist leaves the client with self help techniques such as self observation and personal change that will help them maintain their gains and enable coping in the long-term future.

For clients suffering from long-standing depression or dysthymia, a thorough assessment may lead to a referral and further evaluation of pharmacological intervention in conjunction with longer-term, insight-focused and interpersonal psychotherapy. As the depressive symptomatology recedes, work in therapy typically returns to active decision making within an outcome-focused framework. As stated earlier, confronting loss is the first step in deciding to remain child-free. **Support groups** can do great job where in telling one’s story offers an opportunity to identify losses. This group of people with a common issue or situation utilizes the sense of community to share stories and helpful hints, give/receive support (emotional), promote services and help care for each other where in spending time with other couples in the same position makes them feel less vulnerable and victimized. Patients network with each other and help support each other and further the Counselor facilitates the sessions. Sessions are not limited to indoor counseling, they can go beyond where in creative expression such as drawing, painting, poetry, or collage can be helpful in facilitating bereavement and moving on and for some creating a ritual or ceremony to say ‘good-bye’ to the dream child might help in acknowledging the loss and to move further.

Basic **strategies for decision making** involve taking control of one’s life; developing a positive identity; and reasserting goals and priorities. **Rubin** offers a very useful model for helping clients with decision making. Assessment starts with looking for and identifying possible ‘decision blocks’: (1) resignation or holding on to pain; (2) believing there is only one correct decision; (3) holding on to all possible options rather than choosing any one path; (4) procrastination; and (5) guilt over previous decisions. The work in therapy is to identify the individual or couple’s particular obstacles and, through the use of therapeutic interventions, overcome these blocks to allow the process of decision making to unfold. According to Rubin’s model, the next task is to establish a foundation for decision making based on personal values. When consumed by the blindfold of infertility, the perception and definition of self become myopic. It is suggested that

either during or between sessions, the clients take the time to create a list of priorities. Possible items on the list might be health, quality of life, religion, education, culture, family influence, and security. As clients develop a list, they see themselves as full human beings with the ability to alter their behavior to match their values and create or follow other life plans not involving parenthood. The final task entails committing to the decision. This means operationalising the decision to stop treatment and moving from being childless or the state of having less to the position of choosing a child-free life. For most couples, it is a gradual process that happens over time. They may find it takes months or even years before being child-free feels right or comfortable. Rarely do partners move through this process in the same way and with the same timeline. Allowances should be made for individual and gender specific differences. Eventually, everything begins to fall into place, and concrete evidence of moving on appears. Perhaps a house is purchased without a large family room and four bedrooms, or an application to graduate school is completed or a career move is made. For others, it might be new hobbies; meaningful volunteer work; new friends; or a renewed focus and commitment to their marriage. Realistically, for some couples moving on may be doing so separately because the meaning and purpose of marriage (to have children) has been nullified by childlessness. In these instances, the infertility counselor's work may involve facilitating an amicable marital dissolution; helping both or either partner grieve the lost spouse as well as child; and helping to explore other life goals at possibilities.

CONCLUSION

Infertility could be a result of any cause, but its consequences cost, high on one's emotional and social well being. Infertility has the potential to threaten one's financial well being, intimacy between couple and relationship with family members and society. But how much ever distressful it could be, it is a condition that has occurred at a particular stage of life. Nobody grows up being infertile, we grow up giving many meanings to life and identifying ourselves with it. At one stage of life if the identification was with the parenthood and if its not achieved after several trials, it does not mean life ends there. Stagnation would only increase the burden. Life has to move on no matter what condition an individual is in. Like how Epictetus articulated "Men are disturbed not by events, but by the views which they take of them", changing one's perception of infertility and life events is very important to redefine goals and move forward in life. Emphasis on psychological services should be promoted by health care organizations to avail the service for the betterment of patient's condition. Mental health professionals should actively take responsibilities in rendering such services. Alongside, this movement not only be restricted to clinical team and the patient, since infertility is a social stigma, to eradicate this, participation of each member of a society is as essential, to re-frame one's cognitions about infertility, as it is to a patient.

BIBLIOGRAPHY

1. Bliss C (1999), The Social Construction of Infertility by Minority Women. (Doctoral Dissertation) Retrieved from <http://gerrystahl.net/personal/family/dissertation.pdf>
2. Carter JW, Carter M (1989), *Sweet Grapes: How to Stop Being Infertile and Start Living Again*, USA, Perspectives Press.
3. Corey Gerald(2012), *Theory and Practice of Counselling and Psychotherapy* (9th edition), USA Cengage Learning. Retrieved from <http://books.google.co.in/>
4. Dr Greg Mulhauser, An Introduction to Rational Emotive Behaviour Therapy (Online Article) Retrieved from <http://counsellingresource.com/lib/therapy/types/rational-emotive/>
5. Erickson E.(1980) *Identity and the Life Cycle*. New York, Norton.
6. Froggatt Wayne (2005), A Brief Introduction To Rational Emotive Behaviour Therapy (3rd edition). Retrieved from <http://www.rational.org.nz/prof-docs/Intro-REBT.pdf>
7. Froggatt Wayne (2005), A Brief Introduction To Rational Emotive Behaviour Therapy (3rd edition). Retrieved from <http://www.rational.org.nz/prof-docs/Intro-REBT.pdf>
8. Ginsburg S Elizabeth (2012), *In Vitro Fertilization: A Comprehensive Guide*, New York, Springer publications. Retrieved from <http://books.google.co.in>
9. Goldman B Marlene et al (2000), *Women and Health* (2nd edition), California, Academic press. Retrieved from <http://books.google.co.in>
10. Hammer Burns, L. And Covington, S. N. (2006) *Infertility Counselling: A Comprehensive Handbook for Clinicians* (2nd edition) London, Cambridge University Press.
11. Herson Michel(2002), "Encyclopedia of Psychotherapy", Academic Press, USA.
12. Inhorn M C, Balen FV.,(2002) *Infertility around the Globe: New thinking on Childlessness, Gender and Reproductive Technologies*, California, University of California Press Ltd.
13. Jessie PN (2013), Psychosocial Aspects of Infertility, *Indian Journal of Applied Research*, 3 (8), 634-636.
14. Meniru G I (1997), *A handbook of Intrauterine Insemination*, UK, Cambridge University press. Retrieved from <http://books.google.co.in>
15. Nene UA, Coyaji K, Apte H (2005), Infertility: a label of choice in the case of sexually dysfunctional couples, *Patient Education and Counseling*, 59 (3), 234-8. Retrieved from <http://www.sciencedirect.com/science/article/pii/S0738399105002429>
16. Pattanaik D (2014, March 22nd), 'Infertility, Artificial Insemination and Surrogate Mother in Hindu Mythology' (Online Blog Post) Retrieved from <http://blog.drmaalpani.com/2014/03/infertility-in-hindu-mythology-dr.html>
17. Plessis Du S S, Agarwal A, Sabanegh E S,(2014) *Male Infertility: A Complete Guide to Lifestyle and Environmental Factors*, New york, Springer Publishers. Retrieved from <http://books.google.co.in/>
18. Rao K A, et al (2014), *Principles and Practice of Assisted Reproductive Technology*, New Delhi, India, Jaypee Brothers Medical Publishers (P) Ltd.
19. Sharf R S (2010), *Theories of Psychotherapy and Counselling: Concepts and Cases* (5th edition), Belmont, USA, Cengage Learning . (pp 339). Retrieved from <http://books.google.co.in/>

WEBS:

20. <http://india.unfpa.org/drive/fertility.pdf>

21. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2569858/>

22. <http://www.rebtnetwork.org/whatis.html>

Coping With Stress the Bach Flower Way

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ABSTRACT

In this review article the author argues that the complete presentation is relaxation of stress through neither for Possible of Bach flower remedies as inevitable part of physical and mental health for stress busted leg.

Keywords: *Stress, Bach flower Remedies.*

INTRODUCTION

Bach flower remedies used to treat stress can the best of emotional healing. Dr. Edward Bach who was an English physician found out the importance of the essence of flowers in the healing process way back in the 1930s. It has been noted that the Egyptians used flower essence. This was noted and developed in to Australian Bush Flower Essences which have 66 remedies while the Bach Flowers Essences have a total of 38 remedies by Ian White.

These are some of the Bach flower remedies used to treat stress that work the best. Aspen is the leaf that has an extremely delicate nature and the slightest of breeze will make it shiver and quake. If you have an anxiety because of no particular reason then this is the flower remedy that will help you by instilling a deep rooted feeling of security and boost confidence levels.

Stress management strategies such as Bach Flower Remedies are an excellent way to begin the long, hard climb back from the chaotic, stressful world, in which many of us reside. For emotional stress management, Bach Flower Essences are, by far, the best of the stress management products on the market today. The amazing thing is that this winner in the stress management strategies realm is not even new. It was first discovered in the 1920's and 1930's by a medical doctor in England named Edward Bach.

Mind-body connections

Physical and mental symptoms are often linked, for several reasons. Emotional changes can be a *result* of physical illness and its treatment, developing in response to factors such as the following:

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- Distressing symptoms such as pain, nausea or breathlessness
- Restriction of activity due to weakness or immobility
- Concern about the future medical outcome
- Concern about the wider impact, for example on family and finances
- Direct biological effects on the structure or function of the brain.

Imbalances of mood or personality, and the experience of stress, are also implicated in the *causation* of physical illness. Broadly speaking, this can happen via two pathways:

- The direct influence of thoughts and emotions on bodily systems, especially the endocrine (hormonal) and immune systems
- The increased likelihood of unhealthy lifestyle practices, such as smoking or excessive drinking and self-neglect, among people who are unhappy or stressed.

Many holistic healers believe that psychological imbalance is the root cause of most disease. However it is not the *only* cause and material factors such as genetic predisposition, infections, poor nutrition and toxins in the environment usually play an important part as well.

Therefore, whereas no disease should be considered ‘all in the mind’, most diseases do have some ‘psychosomatic’ component. The role of the Bach flowers is to balance the mind-body relationship, and thereby improve both the mental adjustment to an illness and the capacity for physical self-healing.

Chancellor (1971) Bach's therapy is a modification of Aromatherapy, with the exclusive use of flowers. It is believed that flower essences define moods and emotions. Personality disturbances, loneliness, fear, indecision, despondence, despair, over care, over sensitivity, insufficient interest in self and others, etc., are among the 38 states of the disturbed mind identified by Bach for which he prescribed flowers of 38 different species

Jane Evans (1974) asked that detailing the benefits of the Bach Flower Remedies, flower-based alternative treatments used for depression, anxiety, insomnia, and stress.

Jeffrey R. Cram, Ph.D. (1997) asked that psychophysiology provides a viable tool by which to investigate subtle energies, especially when guided by the metaphysical wisdom of the ages. This represents a blending of the old and new, the East and West. For what is the basis of science but to describe what is all ready known, using the latest tools of our culture. That the Five-Flower Formula has been demonstrated to significantly attenuate the stress response lends credence to the use of these substances in the treatment of stress-related disorders.

Coping With Stress the Bach Flower Way

David Lord (1999) found that the Bach flower remedies easily healing become part of illness-prevention routines and relaxation of mind.

Element Books, Incorporated (1999) asked that various Bach flower remedies are best stress busters. We are explain rescue remedy, white chestnut etc..

Christine Zaza and Natalie Baine (2002) significantly associated with more intense pain. Based on several criteria, the evidence is considered *Strong* for psychological distress, *Moderate* for social support, and *Inconclusive* for coping. This review suggests that comprehensive chronic pain assessment should include routine screening for psychological distress.

Scott Kessman (2005) says that Bach Flower Remedies for Relieving Stress and Other Negative Emotions in People and Animals.

Robert Halberstein et al. (2007) significant that difference between pretest and posttest scores. The results suggest that Bach Original Flower Essence (BFE) Rescue Remedy may be effective in reducing high levels of situational anxiety.

Estella Ritter (2007) asked that the comprehensive help for stress related anxiety and anxiety disorders. Anxiety being the main mental health concern for women, and second only to substance abuse in men, The Treatment of Anxiety & Panic with Bach Flower Remedies offers both a practical and comprehensive guide to everyone struggling with panic attacks, anxiety attacks, social fears, generalized anxiety, or obsessive compulsive behaviors. Representing a fluid, self-directed process to emotional healing the goal of the technique is to present a very contemporary, user-friendly, and immediate response to emotional distress. Working by specifically targeting every type of negative state of mind reveals an amazing, subtle energy approach that is neither created in the language of pop culture, nor new age therapy. By explaining step-by-step how to use one of the most effective healing tools nature has provided to us, this book in a non-clinical voice, addresses the debilitating impact of anxiety, and shows how to effectively overcome anxiety driven symptoms in order to achieve a lasting recovery. Rather than just covering up and continuing to suppress emotional difficulties with drugs, this book supplies the tools needed to manage anxiety, and after that to resolve emotional problems The information can be used to develop one's own self-help program, or, as an adjunct to other healing modalities, the technique will reliably deliver clarity and a lifetime of emotional assistance.

Cornelia Richardson-Boedler(2007)asked that these remedies to totality of mental/ emotional and physical symptoms.

Judy horward(2007)significance of the therapeutic value of these remedies in relation to pain above that of a placebo, the results are encouraging. In particular, relief of negative emotions and promotion of positive thought including how clients opened up about, and dealt with, emotional issues. The indication is that potential for Bach flower remedies as a therapeutic agent in the

relief of pain does exist and is worthy of further qualitative and quantitative investigation through robust, purpose-designed studies to replicate and progress the results shown here.

Kylie Thaler (2009) asked that Most of the available evidence regarding the efficacy and safety of BFRs (Bach flower remedies) has a high risk of bias. We conclude that, based on the reported adverse events in these six trials, BFRs are probably safe. Few controlled prospective trials of BFRs for psychological problems and pain exist. Our analysis of the four controlled trials of BFRs for examination anxiety and ADHD indicates that there is no evidence of benefit compared with a placebo intervention.

Vinton McCabe (2009) asked that Bach's remedies and their myriad uses. More important, he gives a colorful character portrait for each of the remedies; portraits created with insight, humor, and an understanding of human emotions and behaviors of stress.

Jennifer Barraclough (2012) asked that Bach remedies to help with some of the psychological issues which may arise in association with physical illness. It is not just about resolving the 'negatives' such as anxiety stress and sadness, but also includes promoting the 'positives' such as enhanced creativity and more loving relationships.

STRESS MANAGEMENT

Too much 'stress' can have negative effects on mind, body and behavior, and it is generally accepted that many, perhaps most, forms of both mental and physical illness are stress-related to some extent. However, the term is often used very loosely. One broad definition reads as follows: The state of physical or emotional tension which results when the demands facing a person challenge their ability to cope.

This definition implies an imbalance between external pressures and internal resources. It is not only major adverse events and difficulties such as bereavement, divorce, poverty and unemployment, natural disasters and wars which lead to stress. Apparently minor hassles of life, such as having to work with an irritating colleague or live in a noisy environment or cope with too many emails, can be stressful too. In general, the situations which cause the most stress are those which we perceive as being imposed against our will, and as beyond our control. And even 'pleasant' events such as going on holiday can be stressful if they involve too much stimulation and change.

Perceptions of stress vary enormously depending on attitudes, beliefs and personality. The same situation can be an exciting challenge for one person, but a terrifying ordeal for another. Many people who are stricken by some major adversity find themselves coping much better than they would have expected. One of the best 'buffers' against stress of any kind is having a strong network of relationships with people you can confide in, and rely upon for support.

People also vary enormously according to how many stressful situations they experience in their lives. Some seem to attract them by their own attitudes and behavior and, of course, one stressful event frequently leads on to a cascade of others.

Early manifestations of being under too much stress include feeling anxious, irritable, overwhelmed, eating or sleeping too much or too little, tiredness, digestive upsets and various aches and pains. These are reversible symptoms which can be viewed as warning signals. If they are ignored, and the root problem is not removed, more serious mental or physical conditions may ensue. The physiology and biochemistry involved has been extensively studied, one marker of stress being over-secretion of the hormone cortisol.

Having a physical illness is in itself a source of mental stress, so there is often a vicious circle operating - not only does stress contribute to ill-health, but ill-health creates further stress. It is therefore often impossible to tell which came first, but in practical terms it probably does not really matter too much. The important thing is to accept that stress and negative states of mind, whatever their cause, tend to have adverse effects on medical outcomes and quality of life, and therefore it is always worthwhile to try to turn them around into more positive ones. How you are feeling *now* is usually the best starting-point, and this may also provide valuable pointers to the long-term issues which have been important throughout your life.

Stress cannot be avoided entirely, but ways of minimizing its impact include: changing the external circumstances if possible, changing your own perceptions of these circumstances, and practicing the art of acceptance.

Many other parts of this book are relevant to stress management: see for example the sections on Attitudes, Boundaries, Relationships, and Relaxation. And while all 38 of the Bach flower remedies are concerned with reducing stress in one way or another, two of them merit special mention here. **Elm** is for people who, though basically very capable, feel overburdened with responsibilities or overwhelmed with pressures and doubt their ability to cope. **Walnut** helps to protect from outside influences and change.

Bach Flower Remedies to Treat Stress can be used in the form of **Agrimony**. This is also referred to as Church Steeples. It is an herb that is found all over England and grows in abundance along the hedges and farmlands. It is extremely valuable to those who have great deal of anxiety and need to put on a brave face for the world. This constant making of an effort makes it really difficult for them to put on pretence and to hide this they overindulgence in food.

Cherry Plum is the best Bach Flower Remedy for Treat the Stress. It is best for people who are worried about losing their control and therefore feel edgy all the time. This is the most wonderful of options for people who are high strung and have sudden bursts of anger which is linked with anxiety. This can also be used to treat screaming fits in children. **Red Chestnut** is the perfect thing for people who are anxious about those around them. They tend to be over

protective and alert all the time when around friends and family. They also tend to fear the worst and worry themselves and fritter away gainful energy on it.

Rock Rose is an extremely good example of Bach Flower Remedies to Treat Stress attacks linked with terror and panic. It is very good in bringing on a calmness and fortitude to the person. This is specifically in the case of people who have been in an accident or a natural disaster. These are really the best of flowers that can heal.

Bach flower remedies promote relaxation by dissolving mental tension. Examples are **Vervain** for over-enthusiasm, **Oak** for an over-developed sense of duty, **Rock Water** for excessively high ideals and self-discipline, **Beech** and **Vine** for tendencies to criticize and control, and **White Chestnut** for repeated worrying thoughts

Mimulus is a yellow colored trumpet like flower that is used to address stress & fears and anxiety that occur due to some unknown factors. These could be in children and adults who are shy and sensitive. This is a great treatment for people with anxiety that is linked with meeting new people and going out.

CONCLUSION

Most of those who take Bach flowers soon report positive effects such as feeling calmer, lighter and more in control. These remedies are extremely safe. Stress cause problems for anyone who needs to avoid alcohol completely for health or ideological reasons. Though 5% - 10% of users report transient 'healing reactions' in which negative emotions become more obvious, or there are physical symptoms suggestive of toxins being cleared from the system.

REFERENCES

1. Bach Edward.(1936) the twelve healers and other remedies, London: C.W.Daniel.
2. Bach, E. 1977a. "Heal Thyself." In *The Bach Flower Remedies*. New Canaan, Conn.: Kears. Originally published by C.W. Daniel, Essex, England, 1931.
3. Chancellor, P. M. 1971, *Handbook of the Bach Flower Remedies*. London: C. W. Daniel.
4. Christine Zaza and Natalie Baine(2002) Cancer Pain and Psychosocial Factors:Journal of Pain and Symptom Management Volume 24, Issue 5 , Pages 526-542.
5. Cornelia Richardson-Boedler(2007)Applying Homeopathy Bach flower Therapy to Psychosomatic Illness, B jain publishesrs ,New delhi.
6. Cram JR, Kasman G and Holtz J. Introduction to Surface Electromyography. Aspen Press, Gaithersberg, MD. 1997
7. David Lord(1999) Bach Flower Remedies: Diagnosis and Treatment, Astrolog Publishing House,
8. Element Books, Incorporated(1999) Stress Buster: Aromatherapy Massage Bach Flower Remedies, Element Books Limited.

Coping With Stress the Bach Flower Way

9. Estella Ritter(2007) *The Treatment of Anxiety & Panic With Bach Flower Remedies: God's Own Medicine*, Xlibris Corporation.
10. Jane Evans(1974) *Introduction to the Benefits of the Bach Flower Remedies*, Ebury Publishing.
11. Jennifer Barraclough(2012) *Bach flowers for mind –body healing*, Published by Jennifer Barraclough at Smashwords.
12. Judy horward(2007) Do Bach flower remedies have a role to play in pain control?, *Complementary Therapies in Clinical Practice*, Volume 13, Issue 3 , Pages 174-183
13. Kaslof, L. J. 1988. *The Bach Remedies: A Self-help Guide*. New Canaan, Conn.: Kears
14. Kylie Thaler, Angela Kaminski, Andrea Chapman, Tessa Langley and Gerald Gartlehner(2009) Bach Flower Remedies for psychological problems and pain: a systematic review, *BMC Complementary and Alternative Medicine*, 9:16
15. McCutcheon, Lyn.,(1995) "Bach Flower Remedies: Time to Stop Smelling the Flowers.", *Skeptical Inquirer*, vol. 19, #4, pp.33-35,55.
16. Robert Halberstein, Lydia DeSantis, Alicia Sirkin, Vivian Padron-Fajardo, Maria Ojedavaz(2007) *Healing With Bach® Flower Essences: Testing a Complementary Therapy*, *Journal of Evidence-Based Complementary & Alternative Medicine January, vol. 12 no. 1 3-14*.
17. Scott Kessman(2005) *Bach Flower Remedies for Relieving Stress and Other Negative Emotions in People and Animals*, <http://voices.yahoo.com>
18. Tyler, V. E. 1993. "Paraherbalism Is a Pseudoscience." In *The Health Robbers*, ed. by S. Barret and W.T. Jarvis. Buffalo, N.Y.: Prometheus.
19. Weeks, N. (1973), *The Medical Discoveries of Edward Bach, Physician*. New Canaan, Conn.: Kears. Originally published in 1940. Weisglas, M. S. 1979. "Personal growth and conscious evolutionn through Bach Flower Essences." *Dissertation Abstracts International, part B, p. 3614 (1981)*.
20. Wheeler, E. J. 1977, "The Bach Remedies Repertory." In *The Bach Flower Remedies*. New Canaan, Conn.: Kears. Originally published by C. W. Daniel, London, 1952.
21. Wigmore, 1993. *Bach Flower Essences for the Family*. London: published by author.
22. Vinton McCabe (2009) *The Healing Bouquet: Exploring Bach Flower Remedies*, ReadHowYouWant.com, Limited

An exploratory study on the feasibility and challenges of implementation of Right to Education Act (RTE)

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Keywords: *Education Act (RTE)*

INTRODUCTION

The enforcement of the **Right to Education Act** brings the country closer to achieving the objectives and mission of the Millennium Development Goals (MDGs) and Education for All (EFA) and hence is a historic step taken by the Government of India.

Article 21-A and the RTE Act came into effect on 1 April 2010. The title of the RTE Act incorporates the words 'free and compulsory'. 'Free education' means that no child, other than a child who has been admitted by his or her parents to a school which is not supported by the appropriate Government, shall be liable to pay any kind of fee or charges or expenses which may prevent him or her from pursuing and completing elementary education. 'Compulsory education' casts an obligation on the appropriate Government and local authorities to provide and ensure admission, attendance and completion of elementary education by all children in the 6-14 age group. With this, India has moved forward to a rights based framework that casts a legal obligation on the Central and State Governments to implement this fundamental child right as enshrined in the Article 21A of the Constitution, in accordance with the provisions of the RTE Act.

According to Richard Wasserstorm it means, one ought to be able to claims as entitlements (i.e. human rights) those minimal things without which it is impossible to develop ones capabilities and to live life as human beings. Thus Human Rights is about balancing the rights of all of us as individual within the community.

The **right to education** is a universal entitlement to education, recognized in the International Covenant on Economic, Social and Cultural Rights as a human right that includes the right to free, compulsory primary education for all.

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The right to education is a law in Article 26 of the Universal Declaration of Human Rights and Articles 13 and 14 of the International Covenant on Economic, Social and Cultural Rights.

The right to education has been reaffirmed in the 1960 UNESCO Convention against Discrimination in Education, the 1981 Convention on the Elimination of All Forms of Discrimination Against Women,^[4] and the 2006 Convention on the Rights of Persons with Disabilities^[5]

In Europe, Article 2 of the first Protocol of 20 March 1952 to the European Convention on Human Rights states that the right to education is recognized as a human right and is understood to establish an entitlement to education. According to the International Covenant on Economic, Social and Cultural Rights, the right to education includes the right to free, compulsory primary education for all, an obligation to develop secondary education accessible to all in particular by the progressive introduction of free secondary education, as well as an obligation to develop equitable access to higher education in particular by the progressive introduction of free higher education. The right to education also includes a responsibility to provide basic education for individuals who have not completed primary education. In addition to this access to education provisions, the right to education encompasses also the obligation to eliminate discrimination at all levels of the educational system, to set minimum standards and to improve quality

The Constitution (Eighty-sixth Amendment) Act, 2002 inserted Article 21-A in the Constitution of India to provide free and compulsory education of all children in the age group of six to fourteen years as a Fundamental Right in such a manner as the State may, by law, determine. The Right of Children to Free and Compulsory Education (RTE) Act, 2009, which represents the consequential legislation envisaged under Article 21-A, means that every child has a right to full time elementary education of satisfactory and equitable quality in a formal school which satisfies certain essential norms and standards.

The RTE in India Act provides for the:

- (i) Right of children to free and compulsory education till completion of elementary education in a neighborhood school.
- (ii) It clarifies that ‘compulsory education’ means obligation of the appropriate government to provide free elementary education and ensure compulsory admission, attendance and completion of elementary education to every child in the six to fourteen age group. ‘Free’ means that no child shall be liable to pay any kind of fee or charges or expenses which may prevent him or her from pursuing and completing elementary education.
- (iii) It makes provisions for a non-admitted child to be admitted to an age appropriate class.

(iv) It specifies the duties and responsibilities of appropriate Governments, local authority and parents in providing free and compulsory education, and sharing of financial and other responsibilities between the Central and State Governments.

(v) It lays down the norms and standards relating inter alia to Pupil Teacher Ratios (PTRs), buildings and infrastructure, school-working days, teacher-working hours.

(vi) It provides for rational deployment of teachers by ensuring that the specified pupil teacher ratio is maintained for each school, rather than just as an average for the State or District or Block, thus ensuring that there is no urban-rural imbalance in teacher postings. It also provides for prohibition of deployment of teachers for non-educational work, other than decennial census, elections to local authority, state legislatures and parliament, and disaster relief.

(vii) It provides for appointment of appropriately trained teachers, i.e. teachers with the requisite entry and academic qualifications.

(viii) It prohibits (a) physical punishment and mental harassment; (b) screening procedures for admission of children; (c) capitation fee; (d) private tuition by teachers and (e) running of schools without recognition,

(ix) It provides for development of curriculum in consonance with the values enshrined in the Constitution, and which would ensure the all-round development of the child, building on the child's knowledge, potentiality and talent and making the child free of fear, trauma and anxiety through a system of child friendly and child centered learning.

Besides this there are several other detailed features of the act which are not mentioned here due to space constraint.

The Act maintains that All children upto 14yrs if age have the right to free and compulsory education. The child cannot be denied the right to admission to a school of their choice on the basis of class, caste or income. This study is focused on the challenges and concerns of the implementation of Right to Education Act into the society. The study hereby focuses on the lacunae in the provisions of the RTE Act and the challenges of implementation

SOCIAL CHALLENGES:

Neighborhoods criteria

The neighborhoods criterion mentions that the school should be within 4 kms of the residence of the child. But what if no good school is available within the 4 kms area? In such a situation the parents may be forced to put the child in a not so good school and the child may be deprived of

quality education. Chances are that these being slum areas good school may not be available in the neighborhood. The neighborhood restrictions may limit the disadvantaged residents to access only these schools.

Besides there are chances that there are no schools within the 4 kms area at all. What happens in such cases? In India there are many small towns and villages where no schools are available, so what does the parent of the young child do in this case. The parents in this case have only two choices (i) To make the child sit at home and let him/her remain illiterate (ii) To send the child to a far off school which would be both time and money consuming. (iii) Spend exorbitant amount on daily commute (iv) Compromising with the health and safety concerns of the children.

In many of the rural as well as urban areas the public transport system is not so good. In this case it is almost impossible for the children to reach school considering the fact that since they come from underprivileged background they cannot afford to bear the cost of hiring an auto or taxi, nor do the parents have vehicles of their own for pick up and drop.

Travelling to long distance on a daily basis may take a toll on the health of the young children. In the extreme Indian weather conditions it would not be feasible for the children to commute daily. The heat, the dust and the fumes may take its toll on the health of the young children and they may develop complications.

Insufficient Per child expenditure

The government proposes to reimburse the expense incurred to the private school, but in most of the cases the private schools are far too expensive. The fees that the private schools charge is way beyond the pockets of even middle class people, but since education is the key to child's growth, the parents do not really mind paying higher fees even though it may not be economically viable.

The amount the government proposes to reimburse is the same as the cost it incurs in the government schools per child which is very nominal. The government aided and government schools charge a very nominal amount from the parents. In such a situation the private schools many a times end up charging additional fees from the children of the upper strata thus making those parents bear additional expenses. Considering the fact that the parents are already paying quite a heavy sum, it puts additional and unreasonable pressure on the parent's pockets.

There is no mention whether the entire amount incurred by the school towards the education of the underprivileged would be transferred monthly, quarterly, half-yearly or yearly, thus making the planning process inconvenient. If the schools would be told in advance about the schedule of reimbursement it would help in better planning and implementation. It would help the school plan the budget deficit and activities accordingly.

The act does not mention at what frequency the expenses would be recalculated. Should it calculate every two years or does it go according to the consumer price index. Because in these

times of constant inflation the deficits go on increasing, so how does the school take care of this? With the prices increasing frequently it becomes imperative that some time frame be given for the revision of the expenses.

Lack of awareness

According to the present regulation 25% seats to be reserved for children from underprivileged section. In many cases these seats are not filled due to unawareness on parts of the parents. In such a situation it leads to loss to the school because they are not even empowered to fill these seats with children of the upper strata. Hence provision should be made by the Government to spread proper awareness about the RTE Act and its provisions. Campaigns should be held, street plays, mohalla meetings, short movies/ documentaries to be shown. Posters to be put up. NGOs should also undertake the task of not only creating awareness but also helping the underprivileged secure admissions to these schools. Mostly these parents are unaware and illiterate themselves and have no means to secure admission to the private schools.

The present study is based on the interactions that the author had with various private school authorities. (for the purpose of confidentiality the names of the school and resource persons are withheld)

Who is Eligible?

The Act does not stipulate the eligibility criteria for the selection of the candidate, i.e. it does not talk about the income levels of the parents and thereafter the eligibility of the child. Weaker section is a very vast term. Till what income levels are we talking about? How would that be determined? Anybody can use unfair means to get the benefits of the act even though they may not be eligible. Detailed guidelines need to be given with respect to the eligibility criteria. Also careful monitoring is needed to ensure the benefits to the needy and the deprived.

Conclusion

Therefore looking at all these and many more of such issues the government needs to ensure that for the smooth functioning of the act and for the benefit to reach the much needed sections of the society, some more detailing and alterations in the act is required. The weaker section of the society who actually needs to get the benefit is hardly informed about the act and its provisions. Therefore a lot of effort needs to be made both on part of the government, NGOs and alert citizens to make the underprivileged people aware of their rights, the facilities and the services being provided. If we are looking towards an educated India we really need to put in a lot of effort to ensure that the benefits reach the needy and the target of being a literate country is achieved

REFERENCES

1. Advantages and disadvantages of RTE Act, The Hindu, May 23, 2013 <http://www.thehindu.com/news/cities/Madurai/advantages-and-disadvantages-of-rte-act/article4735501.ece>. Accessed on 4th July
2. Burt H.E., (1946) *Applied Psychology*, Prentice Hall, New York.
3. http://www.unicef.org/india/education_6144.htm
4. India Govt Archive <http://www.archive.india.gov.in/citizen/education.php?id=38>
5. Ministry of HRD, Department of School Education and Literacy, Sarva Shiksha Abhiyan (2009) Retrieved from <http://ssa.nic.in/quality-of-education/right-of-children-to-free-and-compulsory-education-act-2009>, 4-7-2014
6. Niranjanaradhya V P and Abhinav Jha (2013), *Right of Children to Free and Compulsory Education ACT – Miles to Go...A Case Study of a Gram Panchayat*, Books for change: Bangalore <https://www.nls.ac.in/ccl/cclmedia/ER/miles.pdf>
7. S. Venkatesh, “The social organization of street gang activity in an urban ghetto”, *American Journal of Sociology*, vol. 103, No. 1 (July 1997), pp. 82-111.
8. Sharma Ramnath and Sharma Rachna (2004) *Advanced Applied Psychology Vol.II*, Atlantic Publishers and Distributors, New Delhi.
9. Shekhar Mittal and Parth J Shah, Reservation in Private Schools under the Right to Education Act: Model for Implementation. Centre for Civil Society.
10. World Youth Report 2003 Chapter 7 Juvenile Delinquency <http://www.un.org/esa/socdev/unyin/documents/ch07.pdf> Retrieved on 14-7-2014

Gender and Economic Status Effect on Self-Esteem among College Students

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ABSTRACT:

The aim of the present study was to find out the impact of gender difference in self-esteem between college students and to study the economic status difference in self-esteem among college students. The sample consisted of 60 college students 30 boys (15 were high economic status and 15 were low economic status) and 30 girls (15 were high economic status and 15 were low economic status) college student were selected randomly from various arts college of Rajkot city in Gujarat. Heatherton, T. F. & Polivy, J. (1991) the data was analyzed in terms of mean, SD, and t-test. The result of t-test revealed significant difference in self-esteem between boys and girls college student as compared to girls boys have healthy self-esteem. Result also revealed that students having high economic status were healthy self-esteem than students having low economic status.

Keywords: *Self-esteem, Gender, Economic status.*

INTRODUCTION

Self-esteem is a term used in psychology to reflect a person's overall emotional evaluation of his or her own worth. It is a judgment of oneself as well as an attitude toward the self. Self-esteem is the perception of one's feeling, thoughts about themselves – how it looks, feels, and moves. It is somewhat based on their daily experiences. Well being and self-esteem both are important for one's. The grade you get an exam, how your friends treat you, as well as ups and downs in a romantic relationship, this all can have temporary impact on your wellbeing. Self esteem relates to how a person thinks and feels about his or her own worth. Body image also refers to the way we see our worth and the way we think that others see our own worth.

On the other hand, high self-esteem consists of the positive thoughts and feelings you have about yourself. In addition, it affects how you think, act, and feel about others, as well as how successful you are in life. The acquisition of high self-esteem involves you becoming the person you want to be, enjoying others more fully, and offering more of yourself to the world. High self-esteem is not competitive or comparative, but it is the state where a person is at peace with-

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- herself or himself. High self-esteem correlates highly with self-reported happiness; whether this is a causal relationship has not been established. Additionally, self-esteem has been found to be related to forgiveness in close relationships, in that people with high self-esteem will be more forgiving than people with low self-esteem.

People with high self-esteem are more likely to minimize the consequences of risky behavior rationalizing risky behavior convincing them that the behavior will not cause harm to themselves or others. This may contribute to behaviors like drinking, taking drugs and engaging in early sexual intercourse as well as other risk taking behaviors. People with high self-esteem consider themselves worthy. They do not pretend them self to be perfect, recognize their limitations, and improve themselves.

Gender has been reported to have an influence on developing self-esteem during adolescence. Boys are more likely to have high self-esteem at this stage of life than girls (McMullin & Cairney, 2004; Robins et al., 2002; Kling, Hyde, Showers & Buswell, 1999). Previous studies also show socioeconomic status to be significantly related to self-esteem. In general, those with higher socioeconomic status report higher self-esteem than those with lower socioeconomic status (Rhodes, Roffman, Reddy & Fredriksen, 2004; Francis & Jones, 1996). Among socioeconomic factors, family income seems to be most related to self-esteem among adolescents (Birndorf et al., 2005). Self-esteem is something that many people struggle with at some point during their lifetime. Self-esteem is defined as the complication of feelings about ourselves that guides our behavior, influences our attitudes, and drives our motivation (Dedmond, 11). Adolescence especially is a period in life with rapid changes that affect self-esteem, shifting expectations, changing roles, and complex relationships (Block, 909). Looking at this aspect the present study was carried out with following objectives:

1. To find out the difference in body image between adult gym users and non-gym users.
2. To study the difference in body image between adult men and women.

METHOD

Participants:

The participants consisted of 60 college students 30 boys (15 were high economic status high than 25,000rs per month and 15 were low economic status low than 25,000rs per month) and 30 girls (15 were high economic status high than 25,000rs per month and 15 were low economic status low than 25,000rs per month) college student were selected randomly from various arts college of Rajkot city in Gujarat. Only F.Y.B.A students were selected

Instruments:

The following tools were employed in the present study:

Personal Data Sheet:

Personal data sheet was prepared to collect some personal information such as age, sex, monthly income etc.

Self Esteem Scale:

Self Esteem Scale constructed by Heatherton, T. F. & Polivy, J. (1991) was used to collect information on this matter. A 20-item scale which measures a participant's self-esteem. The 20 items are subdivided into 3 components of self-esteem: (1) performance self-esteem, social self esteem, and appearance self-esteem. All items are answered using a 5-point scale (1= not at all, 2= a little bit, 3= somewhat, 4= very much, 5= extremely). **Scoring:** Items 2, 4, 5, 7, 8, 10, 13, 15, 16, 17, 18, 19, and 20 are reverse-scored. Sum scores from all items and keep scale as a continuous measure of state self esteem. The subcomponents are scored as follows: Performance Self-esteem items: 1, 4, 5, 9, 14, 18, and 19. Social Self-esteem items: 2, 8, 10, 13, 15, 17, 20. Appearance Self-esteem items: 3, 6, 7, 11, 12, 16. The author of this scale reported satisfactory level of reliability and validity.

Procedure:

Participants were contacted individually at their place of living and at their place of workout i.e. gym. Respondents were clearly informed about the purpose of the study. After establishing the rapport with the participants, he/she was asked to understand the general instructions, however the instructions for specific tests were provided separately. When the subjects were comfortable with instructions and ready for testing, questionnaires were given. She/he was asked to answer each and every item of all the administered questionnaires and was ensured that the responses given by him/her would be kept confidential.

RESULT AND DISCUSSION:

In order to the test hypotheses framed with reference to objective of the study data were analyzed using t-test. When the statistical analysis regarding the impact of gender on self-esteem among college student was carried out interesting results were obtained. These result are presented in table no.1

Table 1: Means, SDs and t-values of body image with reference to gender:

Variables	N	Mean	SD	t-value
Boy college students	30	38.23	11.55	09.22**
Girls college students	30	29.01	09.34	

**p<.01, *p<.05, NS= Not significant

Gender and Economic Status Effect on Self-Esteem among College Students

Table 1 Indicates that boy had higher mean ($M=38.23$) for self-esteem than girl college students ($M=29.01$). It saws that boy had higher self-esteem than girls; the t-value for the significance of difference between mean scores is 09.22, which is significant at 0.01 level.

Results of a few studies are in support of current result as they revealed gender differences in self-esteem. Generally we all know that girls are shy than boys. Being shy can be a problem for students especially for girl's self-esteem because they may not have enough confidence to see themselves in a positive light. Shyness can be associated with a range of socio-emotional difficulties including poor peer relationships and loneliness (Hughes 213). There is some indication that shy children have greater difficulties in school compared to those students who do not appear to be shy. Some of the difficulties shy students may experience are trouble with school adjustment, forming positive relationships, and having a high sensitivity to less positive classroom climates (Hughes 213).

Table 2: Means, SDs and t-values of body image with reference to economic status.

Variables	N	Mean	SD	t-value
High economic status	30	40.00	18.51	03.78**
Low economic status	30	27.24	04.45	

** $p<.01$, * $p<.05$, NS= Not significant

Table 2 Indicates that students having high economic status had higher mean ($M=40.00$) for self-esteem than students having low economic status ($M=27.24$). It saws that students having high economic status had higher self-esteem than students having low economic status; the t-value for the significance of difference between mean scores is 03.78, which is significant at 0.01 levels.

Results of a few studies are in support of current result as they revealed economic status differences in self-esteem. (Riuz, Roosa & Gonzales, 2002; Bergman & Scott, 2001; Robins et al., 2001; Pullman & Allik, 2000) Economic position has a clear impact on developing self-esteem, especially for college students, who are the important stage of adolescence. Our findings imply that lower economic status is an indicator of lower feelings of self-worth and self-esteem. Adolescents of low economic status seem to be a more vulnerable group in the comparison to their peers of higher economic status.

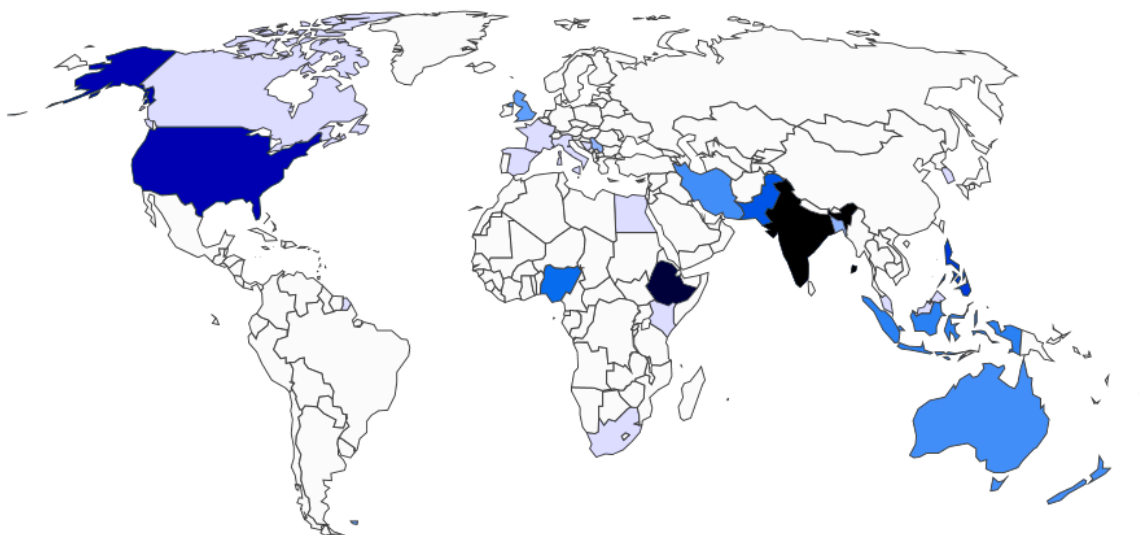
CONCLUSION:

Thus, results of the present study portrayed that boy student and having high economic status student were higher self-esteem than girls and having low economic status student. School and classroom settings can be a factor in building a students' self-perception or esteem since this is where children make most of their peer connections. Creating positive school atmospheres, where students can connect with others, will help them become successful, self-confident students (Caselman, 369).

REFERENCES AND WEBS

1. <http://en.wikipedia.org/wiki/Self-esteem>
2. <http://cmhc.utexas.edu/selfesteem.html>
3. <http://www.psychologytoday.com/basics/self-esteem>
4. <http://psychology.about.com/od/sindex/f/what-is-self-esteem.htm>
5. http://teenshealth.org/teen/your_mind/emotions/self_esteem.html
6. http://psychologytoday.tests.psychtests.com/take_test.php?idRegTest=3207
7. http://www.queendom.com/tests/access_page/index.htm?idRegTest=3105
8. http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/self_esteem?open
9. <http://www.merriam-webster.com/dictionary/self-esteem>
10. <http://www.getselfhelp.co.uk/esteem.htmv>
11. www.netdoctor.co.uk/interactive/interactivetests/selfesteem.php
12. <http://psychcentral.com/lib/how-to-raise-your-self-esteem/000737>
13. <http://eurpub.oxfordjournals.org/content/20/6/647.full>

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